REPORT RESUMES

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A TRANSITION IN NURSING EDUCATION--GUIDELINES RESULTING FROM THE PHASING OUT OF A DIPLOMA NURSING PROGRAM AND THE ESTABLISHMENT OF AN ASSOCIATE DEGREE PROGRAM.

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POSITION STATEMENTS OF NURSES' ASSOCIATIONS INDICATED THAT ALL NURSING EDUCATION SHOULD MOVE INTO THE MAINSTREAM OF GENERAL EDUCATION WITH PROFESSIONAL PROGRAMS IN COLLEGES OR UNIVERSITIES AT THE BACCALAUREATE OR HIGHER LEVEL, ALL TECHNICAL PROGRAMS IN JUNIOR OR COMMUNITY COLLEGES AT THE ASSOCIATE DEGREE LEVEL, AND ALL PRESERVICE PROGRAMS IN VOCATIONAL EDUCATIONAL INSTITUTIONS. MANY PRESENT PROGRAMS WILL BE CLOSED AND NEW ONES ESTABLISHED TO CONFORM TO THE DESIRED PATTERN. GUIDELINES WHICH EVOLVED FROM PHASING OUT THE REGINA SCHOOL OF NURSING AND ESTABLISHING AN ASSOCIATE DEGREE PROGRAM WITHIN THE UNIVERSITY OF ALBUQUERQUE COULD BE ADOPTED BY OTHER INSTITUTIONS FACING SUCH CHANGE. THE MANUAL SUGGESTS PROCEDURES FOR ESTABLISHING AN ASSOCIATE DEGREE PROGRAM AND EXPLAINS ADAPTATIONS MADE BY THE REGINA SCHOOL OF NURSING AND THE UNIVERSITY OF ALBUQUERQUE FOR THE FOLLOWING--EXPECTATIONS FOR THE ASSOCIATE DEGREE GRADUATES, OBSTACLES TO ESTABLISHING ASSOCIATE DEGREE PROGRAMS, INITIAL PLANNING, PHILOSOPHY AND OBJECTIVES, EDUCATIONAL AND HEALTH FACILITIES, CONTRACTS, PUBLIC RELATIONS AND PUBLICITY, ORGANIZATION AND ADMINISTRATION, FACULTY, CURRICULUM, STUDENTS, GRADUATES, AND EVALUATION. A FINAL CHAPTER PRESENTS SPECIFIC RECOMMENDATIONS FOR PHASING OUT AN EXISTING PROGRAM. AN EXTENSIVE BIBLIOGRAPHY, NAMES OF AGENCIES PROVIDING MATERIAL AND INFORMATION, AN EQUIPMENT ESTIMATE FOR THE NUSING ARTS LABORATORY, RECOMMENDED LIBRARY ACCESSIONS, A SAMPLE FORM OF CONTRACT BETWEEN THE HOSPITAL AND THE UNIVERSITY, PUBLIC RELATIONS LETTERS, AND A CURRICULUM PLANNING TOOL ARE INCLUDED. (JK)

A TRANSITION IN NURSING EDUCATION

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A TRANSITION IN NURSING EDUCATION:

Guidelines Resulting From the Phasing Out of a Diploma Nursing Program And the Establishment of an Associate Degree Program

by

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PREFACE

With the publication of the American Nurses' Association's position paper on education in December 1965, it has become necessary for nursing educators to reevaluate their own positions. The essence of the ANA's paper was:

1) "Minimum preparation for beginning professional nursing practice at the present time should be baccalaureate degree education in nursing.
2) "Minimum preparation for beginning technical nursing practice at the present time should be associate degree education in nursing.
3) "Education for assistants in the health service occupations should be short, intensive, preservice programs in vocational education institutions rather than on-the-job training programs." (2)

This indicates that the professional organization has determined that all nursing education should move into the mainstream of general education. As a result practical nurse programs and three-year diploma programs will be phased out to be replaced by collegiate programs and/or preservice vocational programs.

Implied in the ANA Position Paper and the traditions of nursing education are two mandates: 1) that this transition in nursing education be an orderly one, and 2) that no program phase out until it has ascertained that the nursing educational needs of its community will continue to be met. Once an educational program is established, a moral obligation to continue to supply graduates in the field is assumed; therefore, it becomes obligatory for a program that is considering phasing out to be relatively sure that the quantity of graduates from nursing programs in the community will not decrease.

In this vein the National League for Nursing issued a Statement on Nursing Education in 1967. The highlights of this statement were: 1) all educational programs in nursing should continue until community planning has provided reasonable assurance that institutions of higher education can prepare as many as, or more graduates than the numbers being prepared in current programs, 2) National League for Nursing's major efforts shall be directed toward development of sound associate degree and baccalaureate programs, and 3) National League for Nursing shall continue to give direction, guidance and consultation to help all programs improve their curricula, faculty, etc. (17)

Such a stand as this taken by the American Nurses' Association and the National League for Nursing was not assumed without some consideration. Many factors influenced these organizations to adopt such designs for nursing education. Among these were sociological changes in our culture and increased scientific and technological demands upon practicing nurses.

With the 'knowledge explosion' and the increased affluence of our society, more youth are college bound. An exposure to college has become an important status symbol, socially and economically.

As it has become financially feasible, more and more people are taking advantage of our health facilities. The public is also better educated as to its health needs. With this influx of recipients of health care has come increased demands upon nursing personnel. Paper work is growing in every area. More functions, previously performed by physicians, are being delegated to nurses. Additional health workers entails more supervisory responsibilities for the registered nurses. As a result the nurse has less and less time to administer direct bedside care. Inadvertently, this care has passed into the hands of auxiliary personnel with insufficient general knowledge or specialized skills to administer to all the patients' physiological and psychological needs.

Advances in technological and scientific areas have had a tremendous impact on health care. More mechanical apparatus are being used to aid and record bodily functions. It is necessary that the nurse be able to understand the scientific principles involved as well as how to operate the machine. Daily, new knowledge in science is influencing the method of giving care as well as the medications and laboratory tests involved.

Health practitioners are becoming increasingly aware of the influence socioeconomic factors have on the patient's well being. Therefore, the nurse must have more knowledge and skills in the behavioral sciences.

The diploma school graduate is in a quandary. He* does not have enough general educational background and advanced technological knowledge to assume the leadership responsibilities thrust upon the registered professional nurse. He has too much skill in some nursing techniques to accept the lowered status and proportionate benefits of the auxiliary personnel. The design of his educational background is outmoded to prepare him for the new role created between these two groups. In most instances his educational environment is too circumscribed to fill his needs in the rapidly shifting patterns of today's health care.

The practical nurse is in much the same position as the diploma graduate. He has neither the general knowledge nor adequate nursing skills to assume this intermediate step, yet he feels that he has had too much training to be limited to just simple nursing tasks.

*Although traditionally nursing has been considered a feminine profession and is still predominately composed of females, the masculine pronoun has been chosen. The number of males in the nursing profession is rising and will probably continue to do so. In general usage masculine pronouns are used to denote the individual from a group comprised of both sexes; therefore, in this manual the masculine pronoun will indicate the symbolic 'nurse' or 'nursing student'.

A logical consequence of this dilemma was the creation of a nursing technician whose preparation is less than that of the professional nurse but considerably above that of the practical nurse. Preparing such a technician demanded an innovation in nursing education. The resultant innovation was the associate degree program in nursing. This concept was an educational program, two-years in length, located in a community or junior college having a balance between general education courses and nursing courses. Occasionally, they might be located in a four-year college or university. Students take courses in various disciplines, including nursing. The graduate receives an associate degree and is eligible to take the state board examination for nurse registration.

As this educational concept was beginning to gain strength in more cosmopolitan areas, nursing leaders in New Mexico felt the need to re-evaluate the status of nursing education in this state. Until 1959 when the College of Nursing at the University of New Mexico was established, Regina School of Nursing* had been the only source of registered nurses in the state. In the past eight years these two schools combined have not graduated more than fifty students in any one year.

Despite an ever-increasing population in New Mexico, Regina School found that its student enrollment was decreasing and its attrition rate was rising. It was believed that a lack of the 'college image' contributed greatly to this phenomenon. Another distressing element was the difficulty encountered by graduates wishing to enroll in baccalaureate programs. Their courses, taken in the diploma program, were being given less and less transferrable credit making an additional three to four years an untenable plan for basic nursing education.

In an attempt to fulfill the requisites of good educational practice and meet the demands of its accrediting agencies, Regina School had

*A three-year diploma program, established in 1902 by the Sisters of Charity of Cincinnati.

curtailed the service commitments of the students to its parent institution. This increased the cost of the nursing program to St. Joseph Hospital.

Endeavoring to broaden the educational base of its students, Regina School had affiliated with the College of St. Joseph on the Rio Grande (later to become University of Albuquerque) to provide the students with some general education courses for academic credit. This made it necessary to increase student fees until they became comparable with those of colleges and universities.

Since New Mexico is a debtor state for a supply of nurses, the administration of Regina felt the responsibility to assure that the quantity and quality of graduates in the community would be maintained or increased. After a great deal of soul-searching, it was concluded that Regina School could fulfill its commitment to nursing education more effectively by changing its entire approach to nursing education. Eventually the decision was to phase out its program and assist the University of Albuquerque* in organizing a two-year associate degree program.

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*A coeducational liberal arts university operated by the Sisters of St. Francis Seraph.

PURPOSE AND DESIGN OF MANUAL

When the faculty and administration of Regina School of Nursing began to give serious thought to the concept of an associate degree program, the quest for information began. Although the volume of printed matter regarding associate degree programs was enlarging rapidly, it was very difficult to find enough information concerning any one phase of an associate degree program, and the results were rarely as helpful as desired. The National League for Nursing's _Criteria for Evaluation of Associate Degree Programs_, the Western Council on Higher Education for Nursing's _Guidelines for Developing Associate Degree in Nursing Programs in the West_ and the Joint Committee of the American Association of Junior Colleges NLN's _Guiding Principles for Junior Colleges Participating in Nursing Education_, were valuable but not adequately detailed. (15,42,43)

Increasing frustration resulted in the proposal that guidelines to be followed by future programs in New Mexico would be a valuable contribution to nursing literature, and provided the impetus for this manual. With minor adaptations, it is envisioned that this could be used as guidelines for organizing new associate degree programs or transferring established nursing education programs of another type into associate degree granting schools. Hopefully, it could also be used for the same purpose in other states.

The material in this manual is arranged in each section in the following manner:

1) Possible actions to be taken when establishing an associate degree program. These suggestions have been gleaned from extensive reading, attendance at workshops, institutes, etc., and contacts with people involved in associate degree programs.
2) Adaptations, if any, made by Regina School of Nursing and the University of Albuquerque and the rationale for these changes.

3) Appendices will contain samples of various items used in establishing the new associate degree nursing program at the University of Albuquerque.

1. HISTORICAL DEVELOPMENT OF ASSOCIATE DEGREE PROGRAMS

Brown's report Nursing For The Future, published in 1948, had a far-reaching reaction in nursing education. At this time she recommended that all professional nursing be taught in a college or university, and that all good hospital schools consider integrating their programs with junior colleges. (6:127)

The first real break with the apprentice system, heretofore labeled nursing education, was ushered in by Mildred Montag. Based on the research for her doctoral dissertation, she published The Education of Nursing Technicians in 1951. After evaluating the nursing educational system and the technical aspects of nursing practice, Dr. Montag advocated the creation of a new member of the nursing team — the nursing technician. This person would perform duties more limited in scope than those assigned to the professional nurse, but requiring broader knowledge and skill than the practical nurse possessed.(12:72)

The recommended educational program for preparing the nursing technician would be two academic years in length in a collegiate framework, preferably in a community junior college. The student would take courses in general education as well as nursing to prepare him for social and personal competence in addition to acquiring nursing skills. By placing the program in the framework of higher education, the emphasis would be shifted to provide learning experiences the student needs rather than to provide services the hospital needs. An effort would be made to balance assignments and curtail wasteful repetition.

In December, 1951, funds were made available for the Cooperative Research Project in Junior and Community College Education for Nursing. Dr. Montag directed the project from Teachers' College, Columbia University. Seven junior and community colleges and one hospital school were selected for pilot two-year programs. Each school was autonomous. Due to this autonomy, regional differences, and the fact that curriculum planning was the responsibility of the faculty, each program was highly individualistic. Nevertheless, they had certain characteristics in common. These were: 1) each was an integral part of the college, 2) curriculum in each included both general and nursing courses, 3) the nursing content in each was grouped into broad areas, 4) the college assumed full responsibility for financing the educational program, 5) students' experiences were determined by the need for learning rather than the hospital's need for service, and 6) the students participated in campus life. (13:242)

The W. K. Kellogg Foundation became so interested in the associate degree program that in 1958 they analyzed the potentialities in numerous states to determine those ready for pilot programs in this field. California, Texas, New York, and Florida were chosen, and $1,750,000 were appropriated for use in this project. The Foundation elected to support, through grants, six major aspects of the associate degree in nursing movement. These were: 1) faculty preparation, 2) continuation education, 3) consultation, 4) demonstration centers, 5) financing a preparatory planning year, and 6) evaluation of the associate degree nursing programs involved in this project and their graduates. Later the program was extended to include Kentucky and Illinois. Results of this project provided a great impetus to the growth of associate degree programs in nursing. (3:17-18)

Admissions in associate degree programs have grown from 559 in 1955-56 to 6,160 in 1964-65. The percentage of students admitted in proportion to the total number admitted to all nursing programs rose from 1.2% to 10.7%. The ratio of graduates to total numbers graduated from all programs grew from .8% to 7.2%. (1:83,85) The inference from these statistics could be that the associate degree program has begun to fill an ever-growing need. To date there are some 218 programs with many new ones in the planning stage.

2. EXPECTATIONS FOR ASSOCIATE DEGREE GRADUATES

Before considering the establishment of an associate degree program in nursing, one should have a clearly defined concept of the potential of the associate degree graduate. His abilities should be realistically delineated.

It must be remembered that the associate degree graduate is a technician on the nursing team. He should have a fairly broad general educational foundation, a knowledge of all nursing skills, and an in-depth grasp of the basic nursing technics. Associate degree programs do not emphasize leadership skills or specialization within nursing. It will be the professional nurse's responsibility to make final decisions and direct planning of patient care. These limitations should be recognized but not considered as inadequacies. No one person can do everything. An excellent list of nursing skills to be expected from the associate degree graduate can be found in an article written by Aasterud and Guthrie in the Nursing Outlook, August, 1964. (20:52) Functions of the associate degree graduate are also delineated in-depth in Betty Forest's doctoral project. (21)

As the associate degree graduate is being prepared to provide direct patient care, he should be able to identify basic human needs, then plan and administer care to fulfill these needs. He should have enough courses in the behavioral sciences to recognize racial and religious mores and signs of psychological stress. He should have developed beginning skills of basic therapeutic techniques. The associate degree graduate should be able to apportion his time to administer to both overt and covert needs of a group of patients. He should be able to recognize occasions when he should seek help. The associate degree graduate should be capable of establishing good interpersonal relationships. He should be enthusiastic and willing to learn.

3. OBSTACLES TO ESTABLISHING ASSOCIATE DEGREE PROGRAMS

Defining the expectations for its graduates has not been the only deterrent to the establishment of associate degree programs. A major obstacle has been cost. Even though the nursing program is not the most expensive program on campus, it is often more expensive than the majority of the other departments. Resistance on the part of members of the administration and faculty can be a stumbling block. Scarcity of nursing faculty often presents a problem. There are not enough nurses with advanced degrees to fill all the teaching positions available. Frequently, the local accrediting agencies are reluctant to sanction an innovation such as the associate degree program. Overtaxed facilities present another dilemma. Often the college will not have the additional space for lecture-demonstration rooms, etc. Sometimes clinical facilities are inadequate or unavailable. When the college's student enrollment is less than 500, establishing an associate degree program has proven quite difficult. (25)

If the college administrator is enthusiastic about the program, many of these obstacles seem to dissolve. Evidence of community need in the form of results of a survey of nursing requirements and resources can provide a strong justification for his stand. Often hospitals will provide encouragement in the form of scholarships, etc.

A well-informed community, both lay and professional, can be a valuable asset. Resistance on the part of individuals and groups can be eliminated if they thoroughly understand all aspects of the proposed program; therefore, every effort should be made to present this information.

4. INITIAL PLANNING

Usually the impetus for an associate degree program originates from the college to be involved, but quite possibly it may be necessary for a nursing school or hospital to assume the initiative. While speculating upon the wisdom of establishing an associate degree program, the instigator should survey the community to determine whether:

1) more nursing graduates are needed in the community,
2) an associate degree program would be practical,
3) there are adequate educational and clinical facilities available,
4) there is a sufficient number of potential nursing students.

The results of such an appraisal can be, and sometimes should be, negative. Many communities do not need or cannot support a nursing education program.

Once a need has been demonstrated, the following should be done:

1) contact all accrediting agencies and official boards for permission to proceed with planning and tentative sanction of the program.
   These would include:
   a) Board of Trustees of college
   b) Boards of Directors of health agencies
   c) State Board of Nursing
   d) Regional Accreditation Agency
2) Formulate a statement of philosophy and objectives.
3) Appoint a lay advisory committee to provide advice, aid in promotions and publicity, and obtain scholarships and equipment.

4) Contact an established source of consultation regarding associate degree programs, such as the Western Council for Higher Education in Nursing (WCHEN) or the National League for Nursing (NLN). (Addresses in Appendix A)
5) Obtain a nursing administrator.
6) Recruit faculty who will begin constructing curriculum objectives and course outlines.
7) Evaluate college library holdings and make suggestions.
8) Project budgeting needs and tentative time schedule.

The listing of the above steps is not intended to indicate a precise order; some of these steps may be carried out simultaneously.

INITIAL PLANNING FOR THE DIVISION OF NURSING, UNIVERSITY OF ALBUQUERQUE

A brief history of the planning for the establishment of a cooperative program in nursing education which took place between the Regina School of Nursing and the University of Albuquerque, Albuquerque, New Mexico, is outlined here.

1961 Two officials of the College approached the Director of Regina School of Nursing and indicated their interest in offering a nursing program. Administrative officers from the two institutions met to discuss a basic collegiate program in nursing. Further exploration was not continued at this time due to inability to obtain approval from the Boards of Trustees of both religious communities involved. However, the Director of Regina School was advised by the President, Board of Trustees of the Sisters of Charity, to study the feasibility of changing the professional nursing school from a three-year to a two-year program. If in the future a collegiate program seemed appropriate, she was to again submit the request.

Since two religious communities were involved in this venture, a questionnaire was prepared and mailed to educational directors in hospitals that provide clinical nursing experience for nursing students enrolled in a college program conducted by another religious community. The purpose was to obtain opinions in regard to the degrees of satisfaction and cooperation existing in programs where one community operates the college and another the hospital used for student experiences. The replies indicated satisfaction in cases where the college assumed complete control of the school and its program while the hospital made its clinical facilities available for student experience as planned by the college faculty.

1962 Communications were continued and, to increase interinstitutional relationships, arrangements were made with the College to have two of their faculty members teach the courses in Sociology and Psychology at the Regina School campus in the fall of 1963. It was optional for students to take the courses for credit (3 sem. hours each) upon payment of the regular college fees.

Students were notified that for succeeding years tuition would be increased and courses taught by the College faculty would carry credit hours.

1963 Meetings were held to explore the College's interest in offering a two-year associate degree program in nursing. In such an event, Regina School would phase out its diploma program and work closely with the College in organizing this new type of nursing education program. When all aspects were considered, it seemed more reasonably attainable than it had in 1961.

1964 College representatives agreed to open an associate degree nursing program choosing September, 1966, as a tentative admission date. Permission was granted by Boards of Trustees of the Sisters of St. Francis Seraph and of the Sisters of Charity, respectively.

The Archbishop of Santa Fe was informed regarding the planning between the two institutions. The Archbishop's approval for this project was granted. The New Mexico Board of Nursing was advised of these plans, and their permission was also granted. As an interim step, it was proposed that students admitted to Regina in 1965 have their entire first year at the College before moving to Regina Campus for their final two years. As this would have been for one class only, it was concluded that the time and effort expended could be better utilized in planning for the new associate degree program. A course in Anatomy and Physiology (Bio. 35L) was added from the College curriculum to the Regina program and carried 8 semester hours of credit. Interest on the part of personnel in both institutions was sustained, but organizational planning was delayed due to unavailability of a sister from among the Franciscan Sisters for the appointment as Director. The philosophy and objectives for the proposed program were written.

The College representatives communicated with the North Central Association of Colleges and Secondary Schools (regional accrediting agency) regarding their intention to establish an associate degree program and its effect on the current accreditation of the College.

A study was published by the Committee on Nursing Needs and Resources in New Mexico indicating the grave need for additional nurses in New Mexico (9).

1965 Association with the College faculty provided opportunities for cordial relationship and frequent communications. Representatives met again to discuss the obstacles that prevented the planning for the associate degree nursing program. The Franciscan Sisters asked if the present Director of Regina School of Nursing could be loaned to the College faculty to direct the establishment of the nursing program. The Sisters of Charity granted this request.

The College, in conjunction with the Director of Regina School of Nursing, compiled a formal application to North Central to establish an associate degree program in nursing demonstrating the following points:

the need for such a program
proposed curriculum and facilities
available financial aids.

In this application was included the intention of the College to change its name to the University of Albuquerque.

1966 The College of St. Joseph applied to the New Mexico State Corporation Commission for the name change. They received formal persmission to do so January 11, 1966.

The College was encouraged by the North Central Association to proceed with planning the implementation of an associate degree program.

The President of the College notified Regina School and publicized their plans to open an associate degree nursing education program in September, 1967. Having received this directive, the administration of Regina School of Nursing made plans to phase out its existing program. Public announcements were made that no more students would be admitted and that the school would close with the graduation of its last class in September, 1968.

Work was begun formulating a curriculum pattern, course objectives and outlines for the new program.

The University of Albuquerque determined that its newly created Division of Nursing would confer an Associate in Arts Degree (AA). A survey of catalogs had indicated that the majority of associate degree programs used this nomenclature although many granted an Associate of Science or an Associate of Science in Nursing Degree. The University President wanted and supported the new program. Her interest was a strong encouraging element in the development of the Division of Nursing.

1967 In order for students of a new program to be eligible for financial aid under the Nurse Training Act of 1964, it had to be accredited by the then recognized agency for accrediting schools of nursing, the National League for Nursing. The NLN was contacted with a request for reasonable assurance of accreditation*, and arrangements were made for a representative of the Department of Associate Degree Programs of the NLN to conduct an on-site survey of the work in progress and the proposed facilities. Reasonable assurance of accreditation was granted in February, 1967.

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*This type of accreditation is granted on the basis of a preliminary review of the projected program if potential for achieving NLN accreditation is demonstrated. (5:34) Unqualified accreditation is not granted any program before it has been in operation long enough for the NLN representative to evaluate its activities.

5. PHILOSOPHY AND OBJECTIVES

Early in the planning of a new program, a committee should be selected to formulate the philosophy and objectives of the division of nursing. In order to progress with planning, each person involved should understand and be in accord with the stated philosophy and objectives. They should also be able to communicate these principles to others.

As in all following sections of this manual the NLN Criteria for Evaluating Educational Programs Leading to an Associate Degree, 1966, has been used as a guide. A copy of these criteria may be obtained by writing the publication department of the National League for Nursing. (Address, Appendix A)

The philosophy of the division of nursing is the framework for all other endeavors of that department. Therefore, careful attention should be given to the statements made. The philosophy should be:

1) clearly and concisely worded,
2) consistent with the philosophy of the college to avoid conflicts,
3) inclusive enough to indicate one's position on the basic concepts of education in general and education for technical nursing in particular,
4) indicative of how students are to mature intellectually, emotionally and socially,
5) written and accepted by the nursing faculty as a whole,
6) endorsed by the college faculty,
7) periodically reviewed,
8) communicated to all new faculty members and all students.

Commiting the beliefs of the faculty in writing is a most difficult thing to do, but its importance cannot be overemphasized. Course objectives and curriculum patterns cannot be formulated until the framework upon which they are dependent is written. "Logically, . . . the objectives of a school are evolved from its philosophy, and the philosophy and objectives form the basis for determining its activities." (29:2) The purpose of the school should be kept in mind when choosing agencies to cooperate with the program and when selecting the learning experiences to which the students will be introduced.

Objectives should be written in terms of the desired student behavior. They should be specifically stated to indicate what change should have taken place in regard to the student's knowledge and abilities. Rather than make statements that are too broad, several objectives may need to be written each indicating one desired result. Objectives which are vaguely worded or too inclusive allow for a multiplicity of interpretations.

PHILOSOPHY AND OBJECTIVES

DIVISION OF NURSING, UNIVERSITY OF ALBUQUERQUE

The philosophy and objectives for the division of nursing, University of Albuquerque, were first written in 1964. The original version was constructed by the entire faculty of Regina School of Nursing.

In 1967 the nursing faculty at the University of Albuquerque revised the philosophy and objectives of the nursing program to read as follows:

Philosophy

The Division of Nursing, University of Albuquerque, believes in a philosophy consistent with the philosophy and purpose of the University. Through a balanced ratio of general education and nursing courses, the student is guided in the acquisition of basic skills essential to the technical nurse in the practice of her occupation.

Furthermore, the faculty believes:

That education should afford the opportunity for the development of one's capacities in his intellectual, social, physical, moral, personal and career roles.

That nursing is a service to individuals and families. It is an art and a science which incorporates principles of social, biological and physical sciences.

Learning is the accumulation of dynamic experiences by which an individual modifies his behavior through a sequence of planned, guided self-assurance, self-direction and the ability to make decisions. This process of learning must be suitable to the learner's level of maturation and experience, and based upon close interaction and mutual respect between teacher and student.

Purpose

The purpose of the Division of Nursing is to offer a two-year program in nursing which will prepare selected applicants to become registered nurses, capable of administering basic nursing care.

The curriculum is designed to study man through the various periods of the life cycle in maintenance or reestablishment of physiological homeostasis and/or psycho-social equilibrium.

The program includes courses in the humanities, nursing, social and biological sciences. Principles and concepts derived from academic studies assist the student in becoming a stable, adequately functioning person and nursing technician.

Objectives of the Nursing Curriculum

In addition to the relevant objectives of the University,* the Division of Nursing provides the opportunity for the nursing students to:

1. Develop a personal and functional philosophy about the constituents of good nursing care.
2. Demonstrate adequate skills necessary to organize and implement a plan of nursing care to meet the basic needs of a patient.
3. Develop an understanding of the ethical and legal aspect of the practice of nursing.
4. Correlate principles from various areas and apply this knowledge to nursing.
5. Develop a sensitivity to the needs of self and others.
6. Recognize assets and limitations as a person and as a nurse.
7. Understand responsibilities of the nurse as a member of the health team, and in the hospital and in the community.

*Objectives of the University included in Appendix B.

8. Realize the responsibility of continuing education due to the dynamic state of nursing.

This revision was worked out by only faculty members to be involved with the new program at the University of Albuquerque.

A copy of this Purpose and Objectives is given to each faculty and staff member and will be given to each student enrolled. In order to conform to the pattern of the University catalog, the purpose and objectives are paraphrased as follows for the catalog of the University of Albuquerque:

> The Division of Nursing offers a two-year program in nursing education which complies with the philosophy and objectives of the University of Albuquerque. In addition, the nursing faculty accepts its responsibility to make a positive contribution toward the preparation of nurses, who are capable of applying knowledge, skills, and attitudes in the promotion of health with the competency of a beginning graduate, registered nurse.
>
> The curriculum is designed to prepare men and women, married or single, for general nursing positions on a semi-professional level. It covers two (2) academic years. Courses in liberal arts are taken concurrently with courses in nursing. Nursing laboratories will be in local private hospitals and community agencies.

6. EDUCATIONAL AND HEALTH FACILITIES

When choosing agencies (educational and health facilities) to participate in the proposed program, the following factors should be considered:

1) are all agencies accredited by their regional and specialized accrediting organizations,
2) do all persons involved understand and endorse the philosophy of associate degree education,
3) are the distances between agencies reasonable; travel time should not exceed one hour,
4) is transportation available,
5) do the agencies involved have satisfactory physical facilities,
6) do the clinical facilities in the community offer an adequate patient load to justify a nursing program, and
7) are the personnel in the health agencies willing to accept students as learners.

Desirable facilities to be provided by the college for the nursing division would be:

1. Office space - private office for director, individual or double offices for instructors, office space for secretary and clerks, and faculty conference room. Ideally, some office space or conference room should be available on campus for the nursing faculty's use during the planning stage. This gives the nursing faculty an opportunity to become acquainted with the college facilities, personnel, and routine. Early cooperative working relationship with the college faculty is a key factor. They need to be currently informed as to the development of the program.
2. Classroom space - as the nursing division is to be an integral part of the college program, the majority of its classroom needs will be met by existent facilities, such as science

laboratories, classrooms, student lounges, etc. Unless physical expansion is already being planned, there need be only one special requirement for the nursing program. A demonstration-lecture room large enough to seat all nursing students and observers; preferably with tiered seating. This room should be audio-visually equipped and should have one patient unit (bed, bedside table, chair, screen) set up at all times.
When not scheduled for class use, students could use it to improve their nursing skills by self-directed practice.
Ideally, if a new building module is to be constructed for the nursing division, it would contain, in addition to the demonstration-classroom, offices, and regular classroom:
A laboratory-classroom to be used mainly (or exclusively) by the nursing program with space for several patient care units.

3. Supporting space - storage areas, dressing rooms adjacent to laboratory or demonstration room, and rest rooms.
4. Library - the general campus library will be used. Probably only nursing books will need to be added. A conference with the acquisitions librarian will be necessary. Most libraries discourage the addition of textbooks to their shelves, but much of the source material in nursing is in available textbooks. As yet, very few reference books have been written on nursing per se, and these certainly should be purchased. An excellent annotated bibliography of references items for a nursing library was printed in the Nursing Outlook, May, 1966. (34)
   Often the cooperating schools of nursing or hospitals might have duplicates of desirable recent books and journals that they can and will contribute to the library; thus the college could begin their nursing reference section with minimal

financial investment. Suggesting such contributions, it must be remembered that the students need an adequate reference library in the clinical area; therefore, they should not deplete resources which need to be absorbed into the hospital library. A plea to the nursing community will often produce back issues of journals. In this manner, the college can have a nucleus magazine reference shelf simply for the price of binding.

5. Equipment - special equipment and linens needed can often be borrowed from the hospital or rented from a local supplier. Others, needed on a permanent basis, should be purchased.
6. Budget - an average annual budget exclusive of salaries, for an associate degree of nursing division might be: instructional supplies, $500, office supplies, $450, and library, $500. (7:21) The initial budget would understandably be much larger. Federal construction grants and/or vocational funds may be available for schools of nursing. A school that is considering a construction project may determine its eligibility for a grant by writing for the current bulletin on construction grants for schools of nursing from the Public Health Service, Division of Nursing. (Address in Appendix A)

   Desirable facilities to be provided for the use of the nursing faculty and students in the hospital area would be:

   1) Conference or classrooms for pre- and post-conferences and student counseling. These should be on or near each clinical unit.
   2) Dressing rooms with lockers.
   3) Library facilities: access to the hospital medical library and to the nursing station libraries. Minimal contents of these unit libraries should be: a medical dictionary, a recent *Physicians' Desk Reference*, *National Formulary*, a

dietary reference, a reference book related to the clinical specialty of the unit, a hospital policy manual, and a hospital procedure manual.

4) At least one office or conference room for faculty use equipped with telephone.
5) Patient units, medicine rooms, nursing stations, etc., should be large enough that the presence of students will not hinder clinical personnel.

A very good checklist of questions for surveyors of clinical facilities has been published by New York State in _Guide to Selection of Clinical Facilities for an Associate Degree Nursing Program_. (30)

In some instances clinical facilities or patient load in general hospitals may be too limited to provide all the clinical experiences needed. Other institutions that can offer valuable experience include: nursing homes, institutes for unwed mothers, nursery schools, orphanages, schools for handicapped children, and various clinics. In each community there are specialized health agencies that might possibly be utilized. It would be desirable to negotiate separate written contracts with each agency to be involved.

FACILITIES FOR UNIVERSITY OF ALBUQUERQUE NURSING PROGRAM

I. Campus facilities for nursing program

   A. University of Albuquerque - accredited by North Central Association of Colleges and Secondary Schools and the New Mexico State Board of Education.

   B. Facilities at University of Albuquerque

      1. Office space. The new student building, recently completed, contained additional faculty office space. As faculty members moved into new quarters, the offices vacated were made available to the nursing staff. Space allotted the nursing division included an office for the director and the secretary and offices for faculty members. During the planning stages, a conference room was made available to the nursing faculty.

         Even though it is not the preferred arrangement, the director and faculty continued to use the facilities of Regina School of Nursing, located in the same city, for most of their planning merely out of convenience. The faculty commuted to the university for the many meetings and activities in which they participated. They moved on campus permanently one month before the students enrolled.

      2. Classroom space. One large room was remodeled for use as a lecture-deomonstration room. There was adequate space for six patient care units in which students could also practice nursing technics. As the Division of Nursing is an integral part of the University and has access to all facilities of the University, no other classrooms or student facilities were necessary.

      3. Supporting space. Adequate storage space was provided for equipment and records.

      4. Equipment. A list of specialized supplies requested for

the Nursing Arts Lab is to be found in Appendix C. The majority of audio-visual equipment is provided by the Audio-Visual Department when needed.

5. Library. The general university library will be used. To allow for the additional students and nursing references, a Quonset hut extension was added to the library facilities. A list of materials the faculty requested the library to purchase (if not already in the library) can be found in Appendix D. Regina School of Nursing donated back issues of American Journal of Nursing, Nursing Outlook, and Nursing Research for the library to begin a journal reference section. The University arranged for binding.

II. Extended campuses for clinical experience include:

A. St. Joseph Hospital (general hospital) - Accredited by the Joint Commission on Accreditation of Hospitals. Opened in 1902, the present 150 bed hospital was built in 1930. Construction of a new hospital facility, begun in June 1966, will increase the bed capacity to 463.

B. Presbyterian Hospital (general hospital) - Accredited by the Joint Commission on Accreditation of Hospitals. The hospital bed capacity is 500.

C. Nazareth Hospital (a private psychiatric hospital) - Approved by American Psychiatric Association and accredited by the Joint Commission for Accreditation of Hospitals. Opened in 1930, the present bed capacity is 92.

In addition to clinical facilities, each hospital will provide conference space, faculty office space, and access to medical and nursing station libraries.

7. CONTRACTS

When cooperating organizations have been determined, legal agreements should be drawn up to delineate the responsibilities and expectations of each agency. It is possible to develop a satisfactory working relationship without a written contract; however, such agreements help prevent misunderstandings. Contracts should not be too detailed nor too long. Basic provisions should cover the general responsibilities and prerogatives of both parties. Such a relationship should be instituted only in an atmosphere of mutual respect and confidence.

The college should assume complete responsibility for providing educational facilities other than the actual clinical facilities. They should also provide financing, faculty, guidance and supervision. The hospital should provide clinical facilities and consultation upon request.

A profile of a model contract would be:

I. Identification of contracting parties
II. Foundation for the contract
III. Responsibilities and privileges of the college for the program in general and clinical instruction
IV. Responsibilities and privileges of the hospital, including those for facilities and supplies.
V. Method of review, renewal, and termination.

Specific details for utilization of clinical facilities for nursing laboratories might be written, but not in the contract. Interagency committees should determine and review these regularly. The contract between University of Albuquerque and St. Joseph Hospital will be found in Appendix E.

8. PUBLIC RELATIONS AND PUBLICITY

The importance of early and continuing publicity and public relations cannot be over-emphasized. Prompt, accurate information will prevent misconceptions being formed on the part of the majority of the interested public. When poorly informed, alarmists can create quite a furor.

Particularly when a hospital school of nursing is involved, there should be an almost continuous dialogue between the college and the hospital. An attempt should be made to interpret and re-interpret the proposed program to all levels of personnel in the hospital. The faculty and students of the program being phased out (if this is the case) and the medical staff and personnel of the hospital should be kept apprised of plans and progress. If they feel they have been included in the transitional planning, they will accept the new program more willingly.

The college's public relations department should be responsible for outlining a publicity program. The first public announcements of plans should contain correct, thorough information explaining the types of education involved and the advantages of the proposed program. Many persons become apprehensive over such terms as 'technician' and 'terminal'. They cannot comprehend how it is possible to teach a registered nurse in two years all that nurses have been taught in the past, i.e. in the traditional three-year hospital school. The ANA Position Paper (2) would be valuable to use when writing publicity releases. The wording is carefully chosen, and it includes a comprehensive rationale for the establishment of associate degree program and for phasing out diploma and practical nurse programs.

Early publicity releases should emphasize the fact that the associate degree program is not just an abbreviated diploma program nor the first two years of a baccalaureate program, but rather an occupational program that prepares technicians for immediate employment. It should be stressed that the nursing technician is not expected to "know all there is to know" about nursing. The associate degree graduate will be a member of the nursing team administrating direct patient care under supervision.

Publicity should be expedited as much as possible. This will discourage distorted, 'grapevine' rumors. If students and alumnae of the terminating program and other registered nurses are alarmed by half-truths or misinterpretations, they can inhibit community acceptance and even create active resistance to the proposed innovation.

Every opportunity to speak to the public should be pursued. Before any announcements are made through general communication media, the community should be educated as to the need for an associate degree program and the advantages to its students and the community. Participants in the establishment of the associate degree program should seek opportunities to appear before service and civic organizations including professional nursing groups. Nurses should be well informed regarding types of nursing education as they are the interpreters to individuals in the lay community. All possible efforts should be made to speak to high school and pre-high school students through assemblies, career days, Future Nurse Clubs, etc. Counselors and Parent-Teacher Associations could be receptive audiences. Not to be underestimated are the benefits reaped by spending time with individual doctors, nurses, and interested citizens in expounding the philosophy as well as the advantages of this new kind of nursing education program.

Communication media in the area should be utilized to the fullest. Community service programs on radio and television are usually eager to interview representatives of the nursing program. In addition to the local daily newspapers, weekly papers and specialized publications should be contacted.

The faculty and supporters of the proposed program should be thoroughly indoctrinated as to the tenets of associate degree programs. They should be kept informed of progress of the conversion plans in all areas. If they are kept well-informed, they can contribute greatly as informal public relations officers as well as speakers on more ceremonial occasions.

SCHEDULE OF PLANNED PUBLICITY FOR THE UNIVERSITY OF ALBUQUERQUE, DIVISION OF NURSING

Prior to a formal decision to convert their program, the administration and faculty of Regina School of Nursing participated in programs to inform the New Mexico community of the existence and advantages of associate degree programs. While the Director of Regina School of Nursing was President, the New Mexico League for Nursing planned one of its biannual meetings around the theme of associate degree nursing programs. The meeting, held May 22, 1965, was entitled "Meeting Nursing Needs: Community Involvement".

Regina School of Nursing had established a tradition of sponsoring an annual coffee for secondary school counselors in the Albuquerque area to keep them informed regarding trends in nursing education. Included on the agenda for the coffee held in December, 1964, was a discussion of associate degree programs and their anticpated growth.

In the area of public relations, the administration of both educational institutions had to approach a number of people for permission to inaugurate a conversion. The state board of nursing was contacted early in the planning and was periodically apprised of progress. After the Board of Nursing saw early curriculum plans, they gave their approval for printing of brochures and catalogs.

Other people who had to be contacted for sanction included the Boards of Trustees of the religious communities involved, the local Archbishop, and the North Central Regional Accreditation Association. Each of these persons or groups needed basic education as to what an associate degree nursing program was and what the advantages would be to the students and the community.

Once permission was granted for all concerned to initiate formal conversion proceedings, a press conference was planned with representatives of the two institutions involved available to answer questions. Two of the local television channels carried a report on the proposed transition on their news programs. In addition to articles in the Catholic weekly newspaper, both local daily newspapers printed articles regarding the planned change. Unfortunately, these articles placed more emphasis on the reasons for converion than on the structure of the new program and the advantages to the students.

As a result, there ensued a controversial series of articles on nursing education in one of the local newspapers. Unfortunately, a bias for diploma programs was evinced. For a short period of time minor dissension developed among local nursing leaders. Although short-lived, it would have been preferable to have had complete harmony at the launching of a new venture in nursing education. The appearance of a number of less biased articles eased the situation. An article in one of the national hospital publications — Hospital Progress was included in the publicity releases.

In order to maintain the existing rapport with the hospital medical staff and personnel, they were informed prior to the scheduled press conference. The Director of Regina School of Nursing addressed the Executive Medical Committee of St. Joseph at their regularly scheduled meeting which was two days before the press conference. In addition, each doctor on the active staff received a letter from the hospital administrator and the Director of Regina School of Nursing (copies may be found in Appendix F) explaining the merger.

Although the students enrolled at Regina had been frequently apprised of plans for conversion, they were assembled on the day before the press conference and told the exact schedule. Time was allowed for questions regarding all phases of the projected conversion. The nursing service personnel from the hospital were also addressed that day. In this manner public announcements were not a surprise to those most directly involved.

Following the announcement of the proposed change, the Director and faculty of Regina School of Nursing, actively sought opportunities to discuss the new program. Both the Director and the Director of Admissions appeared before a number of organizations including the Women of the Moose, Soroptimist, and college days at local high schools. They sent a letter to each district group of the New Mexico Nurses' Association volunteering to speak at one of their monthly meetings regarding the proposed program. Several groups arranged for them to do so.

In February, 1967, another coffee was held for counselors of secondary schools in New Mexico. Held at the University of Albuquerque, the coffee was well attended. Representatives of the university administration and the nursing faculty addressed the group regarding trends in nursing education. The counselors were encouraged to ask questions regarding all programs offered by the university.

The nursing faculty continue to take an active part in public relations relating to the new associate degree program. They also use every opportunity to discuss nursing as a career with interested groups.

Regina School of Nursing has always had coridal relationships with the other nursing education institutions in Albuquerque. In an effort to preserve this climate, the Regina School Administrator and faculty have kept the University of New Mexico, College of Nursing informed of their progress and plans.

In April, 1965, the National League for Nursing, which is the recognized accrediting agency for schools of nursing, was notified of the impending conversion via letters to the Evaluation Service. Later the Evaluation Service was contacted regarding an on-site visit to gain tentative accreditation for the new program. A member of this agency was sent to Albuquerque in February, 1967, to tour the facilities and review progress to date. Reasonable assurance of accreditation was granted pending the graduation of the first class from the new program.

The New Mexico Board of Nursing held an on-site survey of the program in June, 1967. Tentative accreditation was granted. This was a reversal of the pattern of accreditation. Usually the state board sanctions a new program before the National League for Nursing, but the National League for Nursing representative was in the southwestern area on other business in February, and at her request, the on-site survey of the University of Albuquerque program facilitated her schedule. The minimum deadline for the New Mexico State Board of Nursing to survey a new program is at least ninety days prior to admitting the first class. As they had been kept informed of progress and had sanctioned organizational plans as they had been presented, this survey was not requested until late May, 1967.

At every opportunity newspaper, radio and television publicity was submitted regarding the aforementioned activities to keep the community informed as to progress. It is hoped that this policy will be continued.

9. ORGANIZATION AND ADMINISTRATION

The basic organization and administration of the nursing program will be the same as for other divisions of the college or university. The college or university will provide the financial support for the program. They will also negotiate contracts with health facilities (see Chapter 7). The general administrative framework of the university will be utilized for recruitment, publicity, admissions, record keeping, student welfare, and conferring of degrees.

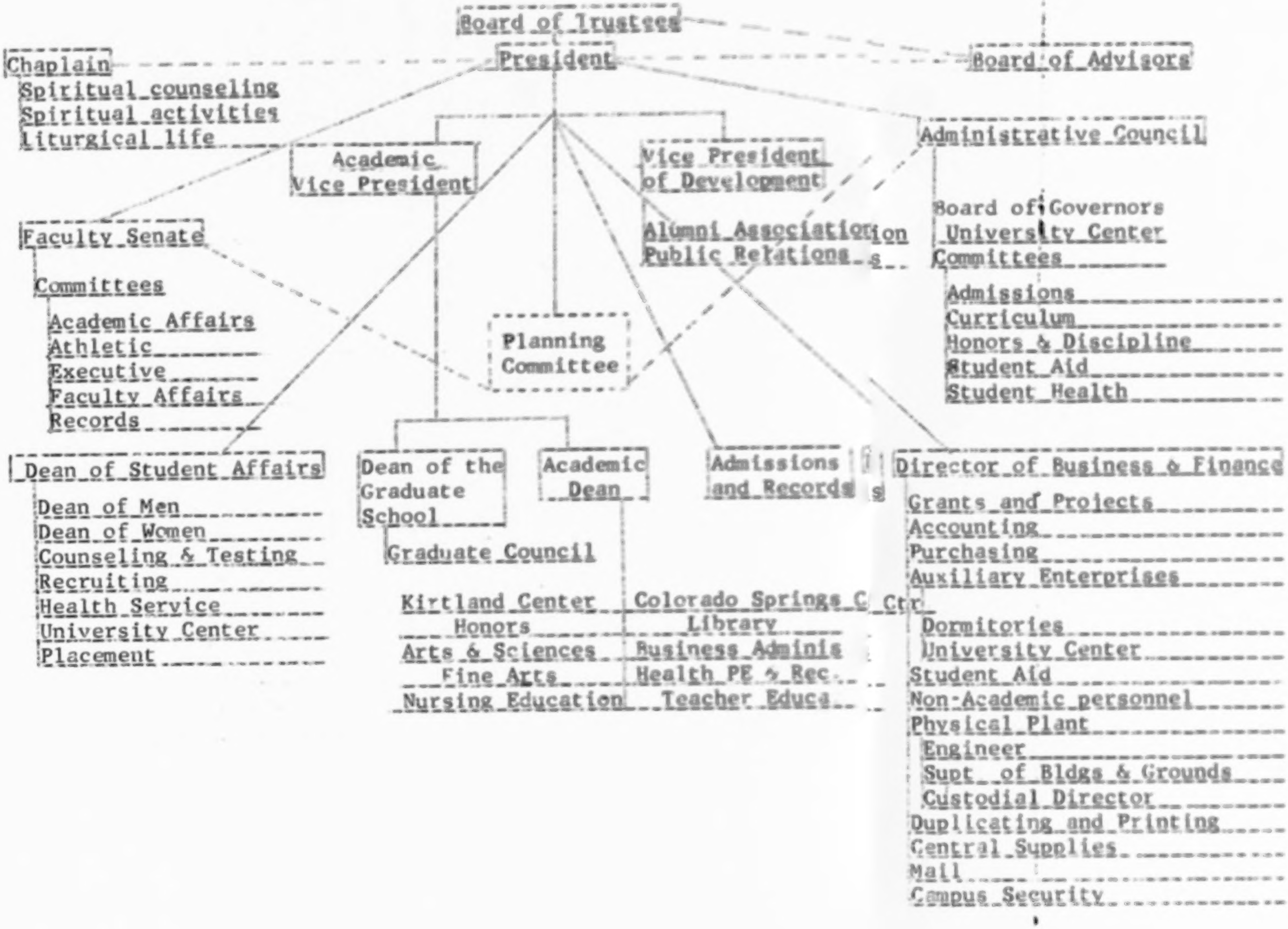
The administration and faculty of the university will probably need to be oriented to all matters regarding nursing. The university will no doubt have written personnel policies and contracts for faculty.

The nursing division and its staff will have the same responsibilities and privileges as the staff of other departments. Problems can often occur due to lack of communication in this area. Frustration and duplication of effort can arise because of ignorance regarding lines of authority and administrative procedure. If the nursing department administrator and/or nursing faculty have not been a part of a collegiate program before, they might be unfamiliar with college administrative procedures.

The agreement between the University of Albuquerque and Regina School of Nursing aligned responsibilities in aforementioned manner.

School of Nursing aligned responsibilities

To demonstrate the position of the Division of Nursing in relation to other departments, a copy of the organizational chart of the University of Albuquerque follows.


Board of Trustees
President
Board of Advisors
Chaplain
Spiritual counseling
Spiritual activities
Liturgical life
Academic Vice President
Vice President of Development
Alumni Association
Public Relations
Administrative Council
Board of Governors University Center
Committees
Admissions
Curriculum
Honors & Discipline
Student Aid
Student Health
Faculty Senate
Committees
Academic Affairs
Athletic
Executive
Faculty Affairs
Records
Planning Committee
Dean of Student Affairs
Dean of Men
Dean of Women
Counseling & Testing
Recruiting
Health Service
University Center
Placement
Dean of the Graduate School
Graduate Council
Academic Dean
Kirtland Center
Honors
Arts & Sciences
Fine Arts
Nursing Education
Colorado Springs C Ctr
Library
Business Adminis
Health PE & Rec
Teacher Educa
Admissions and Records
Director of Business & Finance
Grants and Projects
Accounting
Purchasing
Auxiliary Enterprises
Dormitories
University Center
Student Aid
Non-Academic personnel
Physical Plant
Engineer
Supt. of Bldgs & Grounds
Custodial Director
Duplicating and Printing
Central Supplies
Mail
Campus Security

10. FACULTY

Obtaining adequately prepared faculty in sufficient numbers is one of the major problems for any program of nursing education. The associate degree program is no exception. In January, 1964, forty budgeted positions for associate degree faculty were unfilled. This was 5.7% of the total number (699) of budgeted positions available. (1:34)*

A potential source of faculty which should not be overlooked is the faculties of diploma or practical programs which are closing. Many of these instructors will already meet the prerequisites for collegiate faculty. Others should be encouraged to continue their education in order to meet the academic requirements for associate degree faculty. All will need some reorientation to assist them in adjusting to an entirely different approach to nursing education. This reorientation might be in the form of "formal class work, short seminars or through planned visits to existing programs." (54:3)

Ideally, the director for a projected associate degree program is selected in the preparatory phases of the program. He should be on campus for one year, or at least six months, before the first class is admitted. Many factors are to be considered when selecting this person. Minimally, he should have a master's degree with a clinical nursing major ,and courses in educational administration or

clinical nursing major and courses in educational administration or

the reverse. The prospective director should hold a current license to practice nursing in the state in which the program is located, or should be eligible for and subsequently obtain one. He should be able to meet any other requirements of the college, e.g. teaching certificate, membership in educational associations, etc. His background should include some administrative and/or teaching experience as well as actual nursing practice.

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*In all probability the figures are higher now. The latest information available to the authors was the 1966 ed. of Facts About Nursing the tables for which were compiled from 1964 statistics.

As with all other nursing faculty members to be employed, the potential director must understand and ascribe to the philosophy and objectives of an associate degree program. Understanding the expectations for the associate degree graduate, he will be responsible for the formulation of a program that will produce nursing technicians of high caliber.

In addition to being a division of the college, the nursing program is an entity involving accreditation by a state agency—the State Board of Nursing—and affiliation with off-campus agencies. As a result the director will serve as liason with the health agencies which will include meetings with personnel at various levels to continue interpreting the program. This means that his administrative responsibilities will be greater and his teaching responsibilities lighter than other department heads.

Preferably, the person chosen as director will not be administrator of both programs involved in the transition from one type program to another. This would augment divided allegience as well as overtax the director's strength.

Once the director has been oriented to the college and its policies, he will begin to recruit faculty members. The amount of involvement in this process will vary from institution to institution. Whatever the college's pattern for faculty selection, it will apply to the nursing division also. If the director may submit suggestions and review the records of potential nursing faculty, a more satisfactory selection will be made. Using the services of the personnel department to recruit and screen applicants will eliminate many time-consuming details from the nursing director's agenda. If the personnel department keeps records and handles contracts, uniformity within the university will be maintained and less friction will develop.

Hopefully, the budget will allow the college to employ enough instructors for effective functioning. When in the clinical area, the student-faculty ratio should not be excessive. Often the background of the faculty members will influence the need for additional clinical instructors. A novice instructor would understandably require more assistance than an older, more experienced instructor.

Although the State Board of Nursing usually indicates a minimum, faculty-student ratio, arrangements can be made for temporary changes to test an experimental effort. For example, if using a multiple-assignment technique, fewer instructors might be adequate.

To prevent inbreeding nursing instructors who graduated from different preparatory programs should be recruited. This will have a tendency to expand the outlook of the program by introducing varied methods and information.

The nursing faculty has total responsibility for developing, implementing, and evaluating the entire nursing education program and time must be allowed for more than just teaching. They will be expected to participate in curriculum development and other activities of the total college or university. Such activities may include functioning on long-range planning committees, assisting in recruitment and publicity, sponsoring student activities, and continuing personal and professional development.

The faculty of the division of nursing should enjoy the same privileges -- such as salaries, faculty policies and fringe benefits -- as well as responsibilities as the faculties of other departments. Often an allowance is made for mileage for instructors who make a round trip to health agencies in one day.

In some cases the nursing faculty teaching load is a little less in lecture hours to equate for the time spent in teaching students in their nursing laboratories and for the time spent traveling to and from clinical facilities. The teaching load of faculty members varies to conform to the general pattern of the institution involved. The average instructor's work week includes approximately 15 lecture hours, plus the time spent in preparation, student counseling, evaluation of students and program, attending faculty meetings, and sponsoring student activities. As there is usually less preparation and evaluation involved with lab sessions,this time is weighted. A lab hour is usually considered the equivalent of 65% to 75% of a lecture hour. (7,54)

In addition to being a registered nurse with current practical experience, the nurse faculty member should have his master's degree or have completed graduate work toward such a degree. With a major in nursing, he should have had some courses in education, such as Methods of Teaching and Curriculum Development. Any other credentials required by the college will need to be met. The instructor should have had some experience in teaching or at least an experience through practice teaching.

Most important each faculty member should be thoroughly indoctrinated with the philosophy and objectives of associate degree programs. He should be completely conversant with the predicted skills and knowledge of the associate degree graduate.

The ideal instructor in an associate degree program will be versatile, flexible and willing to experiment. He should know his area of specialization well and be committed to teaching. The nurse instructor should be able to function well in a group situation as many of the existing associate degree programs use a team teaching approach.

As indicated by Drs. Montag and Rogers at a recent conference*, the faculty of associate degree programs should be knowledgeable in

*Annual Meeting, Council of Member Agencies, DADP, NLN, San Francisco, California, March 2, 1967.

their nursing specialities, but they must also know how to teach.

Employing sufficient faculty with the ideal educational background is a problem in any nursing program. The associate degree programs have an additional perplexity in that their faculty should also be indoctrinated with an understanding of this new technical program.

To surmount the difficulties presented, it is often necessary to engage faculty with less than ideal preparation. In such a case, the administrator of the college or university should make every effort to encourage and assist his faculty members to attain advanced knowledge and skills in nursing and in teaching methods. They may also need assistance with day to day work.

"The basic minimum of faculty is four: the chairman of the faculty, who should also have a teaching responsibility, (and) . . three people who will represent other curriculum areas." This was the statement of Dr. Mildred Montag in response to a question at an Associate Degree Workshop.* Dr. Montag also indicated that it was not essential to appoint all four of these people during the first year. One or two could be added before the second year of operation.

New faculty members should have an organized orientation to the college and the division of nursing. Orientation to the clinical area should be on-going. The original tour and indoctrination should be followed by frequent interinstitutional meetings to keep abreast of current changes in either agency.

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*University of Colorado, July 25-29, 1966

FACULTY FOR THE NURSING DIVISION
UNIVERSITY OF ABLUQUERQUE

When the decision was made to phase out Regina School of Nursing and establish an associate degree program at the University of Albuquerque, the search for faculty began. The immediate problem was procuring a director for the Division of Nursing. It was hoped that one would be appointed from the Sisters of St. Francis Seraph (the religious order conducting the University of Albuquerque), but none of their qualified nursing administrators was oriented to or interested in associate degree programs. Since it was desirable to have a religious Sister as nursing director, the Franciscan Sisters directed a request to the Sisters of Charity to appoint the Director of Regina School of Nursing for the period necessary to establish the new program.

Preferably, one person should not administer two nursing programs concurrently, but the exigency of the situation prevailed upon the Sisters of Charity to grant this request. As Regina had a relatively small enrollment, and its competent Assistant Director had been with the school for a number of years, it was felt the Director could be relieved of many of the administrative details she had performed in the past. Commuting time between the two institutions was less than twenty minutes which was another encouraging element. In the majority of cases this would not have been a convenient arrangement, and it would have been essential to obtain a director for the new program from an outside source.

The Director held a master's degree in nursing education. Her undergraduate specialty and nursing experience was in surgical nursing. In addition to teaching experience, the Director had held a number of administrative positions in nursing education and nursing service. An active member of both the American Nurses' Association and the National League for Nursing, she had been the prime motivator of the proposed transition. The Director will teach a one credit hour nursing seminar in the fourth semester at the University of Albuquerque

Once the director had been appointed, in view of phasing out Regina School of Nursing, she evaluated the existent faculty for potential instructors for the associate degree program. At that time none of the nursing faculty members, other than the Director, possessed master's degrees although two were enrolled in graduate programs. Prior to opening the new program, both of the latter had completed the necessary requisites for their master's.

The stated faculty policies at Regina made it possible for these instructors to apply non-utilized sick leave to the time necessary for attending classes, thus providing released time with pay and making it more feasible financially for them to continue their education. The instructors were encouraged to do this, and their teaching schedules were adjusted to make it possible.

The curriculum pattern for associate degree programs had evolved from the traditional big five - Medical, Surgical, Psychiatric, Maternal and Pediatric Nursing - to three areas of emphasis. These are Fundamentals, Maternal-Child Nursing, and Physical and Mental Illnesses. With this basic pattern in mind, the assets of the Regina Faculty were weighed.

Preferably an instructor will have his master's degree with a major in his clinical specialty, and we certainly recommend this, but the ideal is not always attainable. It is sometimes necessary to make an exception. Knowledge of the individual's capabilities will influence such decisions.

The instructor who had taught Fundamentals at Regina School of Nursing a number of years was already enrolled in graduate school. Due to familial and financial demands, she found it necessary to remain in Albuquerque to complete her advanced work. As no graduate nursing program was available in New Mexico, she majored in Counseling and Guidance. The majority of her graduate projects were related to schools of nursing. She was an exceptionally capable person with broad knowledge and experience in Fundamentals and Medical-Surgical Nursing. Her additional preparation in counseling and guidance has accentuated her abilities to reassure and direct beginning students. Knowing her potential, the director of the new associate degree program encouraged her to continue her graduate studies.

At present the university nursing faculty plans to employ the team teaching concept with each instructor functioning as master teacher in her specialty.

At Regina the instructor in Maternal-Child Nursing and her assistant had previously worked as a team for several years, with the instructor's specialty being maternity nursing, and her assistant's pediatric nursing. Already enrolled in a graduate program herself, the instructor encouraged her assistant to begin work on her master's degree.

The Maternity Nursing instructor arranged to take accrued time allowed for illness and vacation and leave the state for three non-consecutive academic quarters. She received a master's degree in Maternal-Child Nursing with a minor in educational administration. With the new program in mind, she took courses related to the philosophy of Junior Colleges. This was to acquire a better understanding of the terminal two-year programs.

The original plan was for the maternity nursing instructor to become master teaching in Maternal-Child Nursing at the University of Albuquerque while her assistant taught Maternal-Child Nursing at Regina. The latter was to join the faculty at the University of Albuquerque in the second year of the program serving as master instructor when the emphasis was on nursing of children and assisting with the teaching in both Maternal-Child Nursing and Fundamentals. She had experience in Fundamentals during the year prior to enrolling in her graduate program. A change of plans prevented this instructor's returning to New Mexico, making it necessary to replace her on the Regina School of Nursing faculty. Original plans were adjusted arranging for the Maternal-Child Nursing and Fundamentals instructors to alternate as master teachers. The Fundamentals Instructor will be master instructor in the first semester nursing course. As she had also taught maternity nursing to practical nurses in the past, this experience seemed to qualify her to assist in teaching Maternal-Child Nursing in the second semester.

For several years a combined Medical-Surgical Nursing course had been taught at Regina School of Nursing. The instructor for this course, two years prior to the closing of Regina School, took a Leave of Absence to do graduate study with a major in Medical-Surgical Nursing. Fortunately, Regina was able to obtain an experienced Medical-Surgical instructor to substitute during her one year leave. At the end of this time, she returned to teach Advanced Medical-Surgical Nursing to the last senior class and will join the faculty at the University of Albuquerque in the second year of the program to teach the course in Physical and Mental Illness. A second instructor will be employed for this area to assist her and alternate as master teacher.

In addition, a psychiatric instructor will be employed in the second year of the program to teach mental health principles and abnormal psychology.

11. CURRICULUM

The most important facet of any nursing program is its curriculum. What and how the students learn is the fruition of all the planning previously discussed. Through curriculum the faculty effects the philosophy and objectives of the program.

Since the associate degee program is controlled by the college, there is greater latitude in curriculum planning. New teaching methods and patterns can be attempted within an educational institution without comment, whereas in a health facility, practitioners feel threatened when they observe major changes in methods and often feel obligated to interfere. It will always be necessary when planning curriculum to meet the minimum criteria of the accrediting agency and the state licensing authority, and meet the college's requirements for associate degree programs. (55)

Generally, the associate degree curricula are divided in approximately a 50:50 ratio between general education courses and nursing courses. As a foundation for nursing, the general education courses may be more heavily weighted in behavioral and science disciplines. The choice will vary widely from school to school. The majority favor sociology, anthropology, growth and development, introduction to psychology, family living, mathematics, biology, chemistry, microbiology, bacteriology, and anatomy and physiology. As all of these courses cannot be included, many programs are requiring one more more of the sciences and mathematics as prerequisites to admission to the nursing program.

Nearly all associate degree programs require sociology, psychology, and history. There is considerable variation as to which specific courses are chosen.

The same variation can be seen in the courses involving communication skills. Courses in composition, speech, problem-solving, and literature-grammar combinations are the usual offerings. Consideration must be given to the college requirements for all students when selecting these courses.

The nursing courses have presented a challenge to creative thinking. To encompass all the content essential for nursing, it has been necessary to rewrite curricula and courses completely rather than just abbreviate diploma or baccalaureate curricula. Nursing content is being regrouped into broad areas with more emphasis on commonalties of patient needs to many diseases, e.g. nursing management of a fever or pain can be taught for broad application rather than for each separate diagnosis. It must be remembered that the nursing technician is a generalist in need of comprehensive basic course content.

The problem-solving approach to nursing is being used in many of these programs. Most schools favor pre- and post-conferences in the laboratory to prepare for and reinforce learning experiences

The instructor constructing course outlines should have at least two or three months to do so. A major question will be -- how much detail is needed? An effort should be made to eliminate needless repetition, and yet have enough to accentuate learning. If clearly defined course objectives are constructed, writing outlines will be much simpler.

When writing course objectives and outlines, the philosophy and objectives of the program must be used as a guide. The faculty should agree upon and list their expectations for associate degree students before starting to develop the course outlines

Almost immediately after writing course objectives, it will be necessary to write brief course descriptions to be used in the college catalog. In order to recruit students, the college will need catalogs and brochures early in the planning stage of the program. Although both should be attractive, the emphasis must be placed upon accuracy.

As in all nursing educational programs, the focus of the associate degree program is upon applying knowledge rather than just acquiring it. An excellent list of questions to be answered when planning course content was compiled for the Colorado Conference of Associate Degree Programs in Nursing in 1963. A copy can be found in Appendix G.

All course content should move from the simple to the complex, from the normal to the abnormal, and from the familiar to the new. When implementing course outlines, very careful attention should be given to the selection of clinical experience. (4) Every experience in a nursing laboratory should be a learning experience that reinforces class presentation and previous learning.

Once course descriptions and outlines are constructed, attention can be given to teaching techniques. The newer methods in adult education have proven very adaptable to associate degree programs. Multiple-assignment techniques, closed circuit television, programmed textbooks, and cartridge films are some of the methods and materials that have been used with success. (56,59,60)

Associate degree nursing education challenges the creativity of the faculty to utilize all sources and resources in learning.

Team teaching has also proven functional in associate degree programs. This method promotes maximum utilization of faculty members.

As indicated the associate degree atmosphere engenders experimentation with course content and methods of presentation. Whatever technique is utilized, it should always enhance implementation of the philosophy and objectives of the nursing program.

CURRICULUM OF UNIVERSITY OF ABLUQUERQUE

In order to maintain an approximate 50-50 balance between nursing and general education courses, the Nursing Division offers thirty-one semester hours in nursing to be taken during a span of two academic years. The total hours required of the associate degree student is sixty-four. The remaining thirty-three hours are devoted to general education courses. As nursing performance depends upon principles from other science disciplines and the nurse's ability to work with people under stress, an emphasis was placed upon scientific and behavioral courses.

Planning for the courses offered at the University of Albuquerque involved many conferences between the nursing faculty and faculty members from other departments. To prevent isolation of the associate degree graduates, it was desirable that no general education course be constructed for just nursing students. Some courses did have to be adapted to provide all the scientific information essential to nursing

The standard curriculum of general education courses selected for nursing students at University of Albuquerque and the reasons for their choice are:

English 101 and 102 (6 hrs.)*

Western Civilization 101 and 102 (6 hrs.)*

Philosophy (3 hrs.)* - students have the preference to elect any course from those offered in philosophy or theology

Speech 105 (3 hrs.) - assists the student to develop poise and ability to express himself.

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*Required of all students in all programs at the University of Albuquerque.

Microbiology (4 hrs.) - previously, the only course of this type offered at the University of Albuquerque was General Bacteriology; therefore, Microbiology is a new offering in the general curriculum at the University of Albuquerque. A more inclusive course was needed to meet the needs of nursing students. After much study and discussion, it was determined that a high school chemistry course with a laboratory should be a prerequisite for this course.

Anatomy and Physiology (4 hrs.) - the course in Anatomy and Physiology which had been offered at the University (mostly for physical education majors) did not approach bodily functions in depth to meet the needs of nursing students. This new expanded course now is being offered, and it is open to all students. As biological principles are the foundation for anatomy and physiology, it was decided that a biology course with laboratory must also be a prerequisite for nursing students.

Child Growth and Development (2 hrs.)
and
Adolescent Psychology (2 hrs.)
chosen in preference to Introduction to Psychology, because it was felt developmental psychology would be more beneficial for nurses who work with people of all ages and types.

Sociology (3 hrs.) - necessary to understanding group influences on man.

Nursing will be taught in three broad areas: Fundamentals (1st semester), Maternal-Child Nursing (2nd semester), Physical and Mental Illness (3rd and 4th semesters). Clinical psychiatric nursing experience will be included in the third and fourth semesters. Diet therapy, normal nutrition, pharmacology, mathematics, legal & moral principles and epidemiology will be included in the nursing courses.

Descriptions of nursing courses as found in the University of Albuquerque catalog are:

COURSES OF STUDY

110L. Fundamentals of Nursing (6)

An introduction to nursing as a practice and as a career. The course is designed to encourage an understanding of the common basic needs of an individual in health and in illness. Emphasis is placed on the identification of principles and the use of problem solving techniques in meeting the patient's needs. University laboratories and hospital clinical facilities provide the student with an opportunity to develop skills in providing for the comfort and safety of the patient. Four hours of lecture and six hours of laboratory.

150L. Maternal-Child Nursing (6)

Designed to give understanding of the normal maternity cycle and possible complications; the place of the child as an integral part of the family and of his environment.

Emphasis is placed on the maintenance of physical and mental health of both the mother and child within the family context. Theory is augmented by selected hospital nursing experiences and observations in various community health facilities.

Four hours of lecture and six hours of laboratory. Prerequisite: Nursing 110L.

210L. Nursing in Phyiscal and Mental Illness (9)

Designed to study the adult in a normal state of health and when the functions of the body and mind are altered. Diet therapy and pharmacological concepts are integrated as the course content moves from the normal to the abnormal. Hospital laboratory experiences are planned to move from the simple to the complex in the care of patients.

Six hours of lecture and nine hours of laboratory. Prerequisite: Nursing 150L.

211L. Nursing in Physical and Mental Illness (9)

Continuation of 210L.
Six hours of lecture and nine hours of laboratory.
Prerequisite: Nursing 210L.

290. Nursing Seminar (1)

A survey of modern nursing trends to prepare students to assume the responsibilities of their roles as graduate nurses.
One hour of lecture.

As the nursing faculty have insisted that no general education class consist of more than ten percent nursing students, they were requested to assist with scheduling. Working closely with the Registrar, they managed to maintain balanced classes in general education and still have their nursing students free to attend the nursing lectures and labs when scheduled.

The tentative schedule of nursing lecture and laboratory at the University of Albuquerque for 1967-68 academic year is:

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
A.M.	Nursing Lecture 8:15 to 10:15	Nursing Laboratory Group A 8:00 to 11:00	Nursing Laboratory Group B 8:00 to 11:00	Nursing Laboratory Group C 8:00 to 11:00	Nursing Lecture 8:15 to 10:15
P.M.	Nursing Laboratory Group C 2:00 to 5:00		Nursing Laboratory Group A 2:00 to 5:00		Nursing Laboratory Group B 2:00 to 5:00

A great deal of time was devoted to determining an appropriate faculty-student ratio. Several nursing educators, among them Dr. Montag, have indicated that a minimum number of fifty students should be admitted in any one class. Due to the apparent interest in the community and the possibility of a number of applicants, the administration of the University was of the opinion that a greater number of admissions would be feasible. The final decision was to admit a class of sixty to sixty-five. To keep the ratio in the clinical area to a desirable proportion the class will be divided into three groups. Each instructor will supervise one half of each group with a ratio of not more than 1:15. In order to preserve continuity, the instructors will supervise the same students for the entire semester.

The master teacher in Fundamentals will give the majority of the lectures during the first semester while the Maternity Nursing Instructor attends lectures and assists. Both instructors will be involved in the laboratory sessions. Each student will have two laboratory sessions weekly -- one in the morning and one in the afternoon -- but all students will attend lectures together. During the second semester, the plan will be reversed; the Maternity Nursing Instructor will be master teacher for N150L (MCN), and the Fundamentals Instructor will act as the assistant. Both will continue to teach in the laboratory sessions.

12. STUDENTS

Surveys conducted indicate that the applicants to associate degree programs differ slightly from those applying to other nursing education programs. The average applicant is older; there is no ceiling on the age limit for community-junior colleges in which most associate degree programs are located. This type of program has a strong appeal to men, married persons, widows and older women whose families are grown or at least of school age. (3,4,75)

There are a number of reasons given as possible incentives to applicants. Among these are:

1) the shorter length of time required appeals to those who might have a limited number of productive years or who have numerous family demands upon their time.
2) the financial demand is less because of the length of the program.
3) reinstatement is easier if a student finds it necessary to drop out.
4) continuation may be easier for those who feel they may wish to take advanced work eventually. Although the nursing courses usually cannot be applied toward an advanced degree, it is possible that the general education courses may be accepted. Once a student has met the criteria for admittance to a college, reentrance is simpler.
5) the collegiate atmosphere is desirable. Students are integrated with those preparing for other careers and/or professions. The curriculum is student-centered rather than work-centered.
6) the status symbol of a collegiate education has become increasingly important both professionally and socially.

In addition to special requirements for the nursing program, all applicants must meet the admission requirements of the college or university. The faculty of the division of nursing should work closely with the admission office to formulate requirements for nursing students. Part of the planning year should be devoted to this area. At a recent conference* Gwendolyn W. Lawson recommended that the nursing faculty arrange to have a nurse representative on the admissions board for the first year or two to help screen applicants.

As the majority of colleges in which associate degree programs are located maintain a more "open door" policy of admissions than most schools of nursing, admissions criteria to the college are slightly less rigid. Although the nursing division can require additional criteria to be met, the nursing faculty members should remember their loyalty is to the college. An occupational group, such as the state board of nursing, should not tell the college whether they can or cannot admit a certain student. The college can admit anyone who meets its criteria. The board of nursing can refuse to license a graduate for a good reason, but they should not interfere with the college's admission policy. To prevent this the nursing faculty should be aware of the state board policies. It would of course be unwise to admit those who could not eventually qualify for and pass the licensing examinations.

To control attrition, attention should be given to predicted success of students with various personality types and previous academic records. (70,71,75) The requirements of the state board of nursing should be considered as criteria. Studies have shown that American College Tests (ACT) scores can be a fair indication of success for students during the first year of a nursing program. (72) It has also been found that interviews have been of relatively little value as a selection tool.*

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*"Teaching in the Associate Degree Nursing Program." Work Conference, Pittsfield, Massachusetts, July, 1967.

In addition to advising the admissions board, the nurse faculty will need to devote a great deal of time to recruiting. Often this will mean no more than educating the college recruiter. Frequently, it will involve active participation in the form of speaking to student and parent groups and meeting with the local counselors and groups of professional nurses.

Nursing students will be charged the same fees as other students the only additional expenses being uniforms, caps and graduate pins. However, this may equate comparable expenses of students in some other department. Transportation to and from clinical facilities should be the student's responsibility and at his own expense.

The nursing student is scheduled into regular classes with other students. If he qualifies and so desires, he should be allowed to take other electives. He should be encouraged to particpate in all campus activities, including extra curricular organizations. Students should be interested in and encouraged to belong to the state Student Nurses' Association. The address for the state organization may be obtained by writing the National Student Nurses' Association. (Address, Appendix A)

All college services, such as counseling, health, dormitories, student recreation, and financial aid should be available to the nursing student. Financial aid in the form of scholarships or work-study programs is available from the general college fund, but a few special programs are open to nursing students only. Among these are:

*Statement of Dr. Montag at the Associate Degree Workshop, University of Colorado, July 25-29, 1966

1) Nurse Training Act of 1964 (P.L. 88-581) Loans up to $1,000 per year are offered to qualified students in need of financial assistance. Preference is given to first year students in an accredited nursing program, or a nursing program with reasonable assurance of accreditation. Fifty percent of the principal plus interest on the loan can be cancelled at the rate of ten percent per year for each year the recipient is employed as a full-time registered nurse in a public or non-profit institution or agency during the first five years after graduation. No payments are due or interest accrued until one year after graduation. The balance of the principal and interest is cancelled in the event of the death or disability of the recipient. The educational institution must service the loans and match funds on a 1:9 ratio. For further information write the Training Resources Branch, Public Health Service. (Address in Appendix A)

2) Allied Health Profession Personnel Training Act of 1966 (P.L. 89-751) Nursing Educational Opportunity Grants of $200 to $800 per year are given to students on the basis of need and matching scholarship funds form the educational institution involved and/or other sources. An additional award of $200 will be granted if the student ranks in the upper half of his class. No matching funds from the educational institution are required for this award. Act expires in 1969. For further information write the Division of Nursing, Public Health Service. (Address in Appendix A)

Other good sources to contact for information regarding financial assistance to nursing students are: 1) Bell Syndicate Research Office, 2) ANA/NLN Committee on Nursing Careers, and 3) New Mexico State Board of Vocational Education. (Addresses in Appendix A)

Local sources of loans and scholarships should be sought. These might include private scholarships, medical associations, hospitals, hospital auxiliaries, nurses' associations, service clubs - such as Pilot Club and Soroptimist Club - and industries. A recent article on scholarships and loans for nursing students can be found in the

American Journal of Nursing, June, 1967. (74)

Students will be required to meet the same criteria for graduation as other associate degree graduates in the college. It will also be necessary to meet the requirements of the state board of nursing in order to be eligible to write the state licensure examination. Nursing students will usually be expected to purchase their graduate pins and caps.

Many associate degree programs have special hoods for their graduates to wear with the academic gown in the graduation ceremonies. The use of a hood, which indicates the degree being conferred, should be determined by the policy for other associate degree programs in the college or university. The color which represents nursing is apricot. Hoods do not entail additional expense for the graduate but are included in the graduation fee charged all students.

STUDENT REQUIREMENTS
FOR UNIVERSITY OF ALBUQUERQUE

Applicants to the University of Albuquerque must have graduated from an accredited high school and have maintained an average of "C" or better.

The General Educational Development (G.E.D.) test can be administered to applicants over 21 who have not completed high school. If their composite scores are adequate, they will be granted an Equivalency Certificate by the state and can enroll in the college. If the score in English or Mathematics is low, the applicant will be required to remove this deficiency by taking a non-credit remedial course. Applicants who have not graduated from high school or have high school deficiencies and are not yet 21 can qualify under the High School Equivalency Program (H.E.P.) if their scores on the G.E.D. are adequate. A minimum of fifteen units in academic subjects is necessary for admission. Required subjects are:

Subject	Units
English	3
Mathematics (exclusive of general math)	2
Social Science (1 unit must be U.S. History)	2
Natural Science (1 unit must be Biology, Chemistry, or Physics)	2

Freshmen applicants are required to take the American College Test (ACT). These scores are used for both screening applicants and counseling students. A student admitted with deficiencies must make these up before beginning his sophomore year.

The nursing faculty worked closely with the Director of Admissions to determine the specific requirements for admittance to the Division of Nursing which are:

1) Units in natural sciences must include Chemistry and Biology. Both must be laboratory courses.

2) Grades in mathematics and sciences must be "C" or better.

3) If at all possible, a personal interview with the Director or a faculty member of the nursing program will be arranged.

4) Deficiencies must be made up before entering the program.

If there is a question of an applicant's suitability, the Board of Admissions refers the applicant and his records to the Director of the Division of Nursing.

Students are expected to provide their own transportation to clinical facilities. If this becomes too inconvenient, a college bus will be provided. Should this be necessary, a fee will be charged. Each applicant has been alerted to this possibility.

A great deal of attention was given to the selection of a uniform for the nursing students. An effort was made to find a style that was becoming to all sizes and ages of women. The uniform had to be functional and yet modish. A local uniform supplier volunteered to provide custom made uniforms from a design selected by the faculty for a reasonable price. The faculty preferred a color as being more serviceable. It was not desirable to have the students wear their uniforms on campus, so consideration was given to a style that would permit a quick change. The final choice was a jumper style in a blue and white thinfeather material which is a cotton-dacron blend.

Applicants were informed during the summer where to purchase the uniforms and were requested to do this prior to registration. The same dealer will supply the uniforms for male students.

Other additional fees for nursing students will be for National League for Nursing achievement tests to be given during the program and for graduate caps and pins.

13. GRADUATES

The educational background of the associate degree program should produce a candidate for licensure who can function effectively in the following areas:

1) Observation — The graduate should be alert to the patient's physical, emotional and mental needs. He should report these observations and make suggestions to the charge nurse or team leader when nursing care is being planned.
2) Organization — The associate degree graduate should be able to plan his daily activities in order to give the maximum amount of quality care to the overt and covert needs of all the patients assigned to him.
3) Patient Care — The graduate should be able to administer direct patient care. He should know, understand, and apply the scientific and behavioral principles involved in:
    a) maintaining environmental comfort
    b) positioning patients (and himself) for diagnostic and therapeutic procedures
    c) maintaining patient hygiene
    d) measuring vital signs
    e) maintaining nutritional and fluid intake
    f) promoting proper elimination
    g) administering medications
    h) charting accurately
    i) establishing and maintaining good interpersonal relationships with patients and other personnel
    j) teaching patients self-care
    k) reporting observations regarding patient to others on the health team, and
    l) seeking aid when needed. (20,21,22,23)

4) Evaluation — The associate degree graduate should be able to assist in evaluating the nursing care administered.

5) Education — "The objective of continuing education in nursing is to add constantly to one's nursing knowledge and competence so that neither becomes obsolete." (77:1219) The associate degree graduate should be imbued with the desire to continue to take advantage of all informal and formal educational offerings, such as in-service, workshops, self-improvement. A few associate degree graduates will elect to pursue additional academic goals — baccalaureate, clinical specialist, master's, etc.

The associate degree graduate will write the state board licensure examination in the state in which he was educated. The college should plan a program which will prepare him to meet the standards of the state board of nursing. If, because of additional requirements, he cannot be licensed in another state, it is not the college's responsibility. The college educates for its community.

In comparing the scores of graduates from basic nursing programs (associate degree, diploma, and baccalaureate) on licensure examinations, it has been determined that the associate degree graduates are "equal or slightly superior to the total group of candidates for licensure with regard to abilities that are measured by the licensing examination." (16:29)

Although they will differ in abilities, motivation, and achievements, graduates of associate degree programs have certain characteristics and accomplishments in common, including enthusiasm, willingness to learn and question, good interpersonal relationships, capable application of problem-solving techniques, and ability to administer basic direct patient care.

The associate degree graduates have less dexterity as a result of minimal amount of repetitive experience. It is also necessary for them to adjust to an 8 hour working day and evening and night shifts. Since these graduates have learned to give direct patient care, they soon become aware that all shift give the same care, but the climate and responsibilities sometimes vary.

All nurses from any educational background employed by a hospital should receive adequate orientation and continuous in-service education An in-service program is no longer considered an extravagance on the part of the hospital, but an essential responsbility. The new associate degree graduate may need more direct supervision at first and, perhaps, longer orientation, but he will soon become a capable practitioner.

UNIVERSITY OF ALBUQUERQUE GRADUATES

Graduates of the University of Albuquerque program will be eligible to write the New Mexico Board of Nursing licensure examination for registered nurses. Upon completion of the two-year associate degree program, the graduate should be able to administer safe, competent, direct patient care, to be imbued with a desire to continue his education informally, and/or perhaps formally, and participate in his civic and professional organizations.

The associate degree graduates from the University of Albuquerque should be eligible for positions as staff nurses in local hospitals, doctors' offices, and other health agencies.

14. EVALUATION

Continuous evaluation of the nursing program should be systematic and identify all facets of the program. The basis for evaluation should be the philosophy and objectives of the program. (80:24) Another guide could be the criteria of the National League for Nursing Department of Associate Degree Programs.

All phases of the program should be examined, beginning with the philosophy and objectives. Are they realistic? Is this really what the participants in the program desire to accomplish? Do they meet the accrediting agencies' requirements?

Keeping the philosophy and objectives always in mind, the organization and administration, faculty, students, facilities, and curriculum should be scrutinized. Do they implement the purposes stated?

The records and reports of the nursing division should be evaluated for pertinence and utility. The method of evaluation of both the program and the students should be reviewed periodically.

The system of evaluation used by the college or university as a whole will influence the method employed by the division of nursing. When the division of nursing does its self-evaluation, the following should be considered:

A. How is the effectiveness of the organization and administration of the unit determined

B. What plan and method is used to appraise
  1. Resources and facilities
  2. Curriculum
  3. Achievement and performance of graduates

C. How does the student evaluate
  1. His own program
  2. Effectiveness of learning experiences

D. What have students achieved on state boards for the past three years (83:7-8)

At present national or regional accreditation is necessary for the college and/or its students to qualify for federal funds under the Nurse Training Actof 1964. There are two routes by which this accreditation may be achieved — via the National League for Nursing and/or the regional general educational accrediting agencies. The established procedure of the National League for Nursing has for some time been the only method to achieve national accreditation. If evaluation is on-going and the criteria of the National League for Nursing are used as an instrument of evaluation, meeting their requirements for national accreditation will be no problem. The purposes of National League for Nursing accreditation are:

1. Stimulate continual improvement of nursing education.
2. Offer assistance in self-evaluation and self-improvement.
3. Describe characteristics of the educational programs in nursing.
4. Identify a program worthy of public recognition.
5. Guide prospective students in choice of programs.
6. Assist counselors, etc., in advising students regarding choice of program.
7. Serve as a guide in interinstitutional relationship, transfers, etc.
8. Aid employers of nurses in assessing qualification of candidates. (82:2-3)

The National League for Nursing only grants accreditation to programs after all their components are in operation, but as previously mentioned, reasonable assurance of accreditation can be granted a new program after the NLN Board of Review has examined the proposed facilities, faculty, curriculum, etc. This is usually accomplished in the form of an on-site survey (one day) in the late planning stages of the program.

An alternate procedure for receiving reasonable assurance of accreditation has recently been devised by the National Commission on Accrediting. Under this plan the National League for Nursing will furnish the educational accrediting bodies with appropriate guidelines for surveying associate degree programs accompanied by rosters of qualified nurse educators who could serve on regional accrediting teams.

When these regional teams survey colleges, a report on the nursing program will be sent to the National League for Nursing. After reviewing the reports, the League will indicate whether the program examined is comparable in quality to other programs accredited by the League or given reasonable assurance of such accreditation. (79)

This alternate method of accreditation has been suggested by general educational institutions for quite some time. Some colleges and universities question specialized accreditation for each department; therefore, they are adverse to such an innovation for the nursing department. This new plan for accreditation will simplify the procedure and curb expenses while allowing specialists in the field to participate in the accreditation of nursing programs.

EVALUATION PLANS FOR THE UNIVERSITY OF ALBUQUERQUE

The Division of Nursing at the University of Albuquerque will conform to the university's policies regarding evaluation; will co-operate with its on-going plan; and will direct specific activities toward improving the nursing program. Such over-all evaluation will encompass evaluation of 1) the associate degree program and its curriculum in terms of the stated beliefs and objectives; 2) teaching and learning procedures; 3) student progress and 4) outcomes. (86:629)

Evaluation is an essential part of teaching beginning with the setting up of objectives, selecting and organizing of content, and planning learning activities essential to the achievement of the objectives. Teacher effectiveness will be assessed by tape recordings, observations by teacher colleagues, self-appraisal, and student opinionnaires of course content and teacher presentation.

Evaluation of student performance will determine to what extent the student is acquiring the knowledge and skills identified in the objectives of the nursing program and individual courses in terms of behavioral outcomes. The methods used to accomplish this will be written work, essay examinations, objective examinations — both teacher made and standardized, objective problem-situation tests, anecdotal records, and rating scales.

A follow-up of students and graduates is planned utilizing the results of the performance on the State Board Test Pool, confidential appraisals by employers, and periodic opinionnaires of graduates to determine the adequacy of their preparation in terms of job demands.

In summary the planned systematic evaluation of all aspects of the associate degree program will be formulated according to college policies and the National League for Nursing 1966 Criteria for the Evaluation of Educational Programs in Nursing Leading to an Associate Degree.

PHASING OUT AN EXISTING PROGRAM

When phasing out an existing nursing school, every effort must be made to maintain an excellent quality of education for the students currently enrolled. Students should continue to feel they are being offered all the advantages — educational, interpersonal and social, — conferred upon any previous class. As class numbers diminish and students and personnel become concerned over their future, this becomes increasingly difficult. Feelings of nostalgia and loyalty to the school make the proposed change difficult for students and alumnae to accept. Students, alumnae and personnel should be given periodic progress reports and informed how their futures will be affected, if at all. Continuous communication can help to alleviate these emotions to some extent.

As a matter of good public relations, the director of the school being phased out should hold individual conferences with his personnel and indicate placement possibilities. Some personnel may be able to transfer to the new program; others may need help obtaining employment in affiliated agencies. Some should be encouraged to seek new positions elsewhere. A demonstration of concern for their future is a symbol of appreciation for their past services.

An important item to be considered is storage of and access to student and graduate records. It is the obligation of any educational institution to continue to provide transcripts and evaluations for their former students. Some arrangement must be made to have these records available and someone responsible for their preservation and maintenance.

PHASING OUT REGINA SCHOOL OF NURSING

As mentioned in Chapter 8, all persons and organizations affiliated with Regina School of Nursing were notified in advance concerning its plans for closing. They were regularly informed of progress and included in the planning whenever possible.

Several faculty members were encouraged to enroll in educational programs which would qualify them for the faculty at the University of Albuquerque. One of the secretaries will also join that staff. Prior to the closing of the Regina School of Nursing, the librarian and several instructors decided to seek employment elsewhere. They were encouraged in these plans and given good recommendations. One secretary and the assistant director remained after the school closed to complete records and arrange for storage. The St. Joseph Hospital Personnel Department will be responsible for these records. Graduates will be notified where records are located and how they may be obtained. The New Mexico Board of Nursing will also be informed as to their disposition.

Since the buildings and equipment were the property of St. Joseph Hospital, they were utilized in the hospital's expansion program. Extra chemistry laboratory equipment was donated to the University of Albuquerque and to the high schools in the city conducted by the Sisters of Charity.

SUMMARY

The American Nurses' Association and the National League for Nursing have indicated in recently published position statements the conviction that all nursing education should move into the mainstream of general education with all professional nursing programs in colleges or universities at the baccalaureate or higher level, all technical nursing programs in junior or community colleges at the associate degree level, and all preservice programs in vocational education institutions.

By implication, educational programs in existence that do not conform to this pattern should evaluate their positions. Many will decide to close their programs and establish ones that will conform to the desired pattern.

The preceeding manual provides guidelines developed from the experiences of persons who were involved in the phasing out of a diploma program and were responsible for the establishment of an associate degree program.

Due to their commitment to upgrading nursing education, these individuals adopted the belief of the Council of Member Agencies, Department of Associate Degree Programs, National League for Nursing, that a nursing technician is "a registered nurse with an associate degree in nursing, licensed for the practice of nursing, who carries out nursing and other therapeutic measures with a high degree of skill, using principles from an ever-expanding body of science.

"The technical nurse performs nursing functions with patients who are under the supervision of a physician and/or professional nurse and assists in planning the day-to-day care of patients; evaluating the patient's physical and emotional reactions to therapy, taking measures to alleviate distress, using treatment modalities with knowledge and precision, and supervising other workers in the technical aspects of care." (1967)

Preparing this nursing technician has necessitated an innovation in nursing education — the associate degree program. As this is an entirely new concept, it has been necessary for curricula to be rewritten, faculty indoctrinated, and the public reeducated to make the establishment of such a program a reality.

As a basis for planning a program of this type, one should understand and ascribe to the philosophy of associate degree nursing education and be cognizant of the expectations for associate degree graduates. Other factors affecting the establishment of an associate degree program would include:

1) Finances,
2) Sufficient, qualified faculty,
3) Attitude of local accrediting agencies, e.g. the state board of nursing and the state educational association,
4) Availability of adequate facilities — educational and health,
5) Community need, and
6) Support of the college administration, the directors of health facilities, and the community.

Careful planning and extensive on-going publicity are valuable assets in the organization of a new nursing program.

Phasing out one educational program and establishing another will involve a great deal of careful communication with the community and professional health groups. Tactful attempts should be made to contact every person or agency that may feel an involvement with the school. It should be stressed that the administration of the school desires to help maintain the quality and quantity of registered nurses prepared in the past, but as they ascribe to the beliefs of the American Nurses' Association and the National League for Nursing, every effort will be made to implement the position taken by these organizations regarding nursing education.

Once the decision to phase out one program and establish another has been made, the philosophy and objectives for the new program should be commited to writing. Using them as a guide, the following should be carefully selected to implement them: curriculum offerings and objectives, students, facilities, and faculty.

Ideally, faculty who will teach first-year students should be on campus six months before the program begins and should include:

A. Director whose minimum educational preparation should be a master's degree with experience in administration and/or teaching.

B. Three or more nurse faculty members, some of whom can be employed during the first year of operation rather than during the planning stages. Minimum educational preparation should be a master's degree with a nursing major and some education courses. Nursing faculty members have the same privileges and responsibilities as the faculty of other departments.

If possible, the director and/or faculty members should choose facilities for the proposed program. The educational institution controls the nursing program, and contractual agreements should be made with the health agencies. These latter agencies provide facilities for nursing laboratory experience, but have no authority over, or financial responsibility to, the nursing program. All facilities should be accredited by the appropriate accrediting agencies.

Congruent with selecting agencies to participate in the associate degree program, faculty should devise a curriculum pattern and course objectives. The curriculum should be balanced approximately 50-50 between general education and nursing courses. Nursing content should be grouped into broad content areas. A typical pattern for nursing courses would be Fundamentals in the first semester, Maternal-Child Nursing in the second semester, and Nursing in Physical and Mental

Illness in the third and fourth semesters. A Nursing Seminar is frequently offered during the second year.

Through associate degree programs, individuals are being recruited into nursing who for many reasons, including socioeconomic pressures, would have been unable to enroll in other nursing programs. These students are integrated with those of other programs on campus sharing the same facilities, regulations, and advantages. In some cases there are additional sources of financial aid, such as the Nurse Training Act of 1964, Health Professions Personnel Training Act of 1966 and the Vocational Education Act of 1963.

When these students are graduated, they will be able to administer direct patient care and help plan and evaluate that care. They will be eligible to write the state board examination for nurse licensure. The health agencies will assume the responsibility for strong orientation programs and planned in-service for nurses at all levels of preparation. Although the associate degree graduate may need additional support during orientation, they rapidly develop into excellent bedside nurses.

Continuous evaluation of the students, the graduates, and the nursing program should be systematic. The National League for Nursing's _Criteria for the Evaluation of Associate Degree Programs_ can be a useful guide for such evaluation.

The success of associate degree programs to date and their projected growth, indicate that the nursing technician is filling a definite need in patient care. Thus, nursing educators who are committed to establishing such programs are aiding their communities in addition to complying to the pattern of nursing education proposed by their professional organization.

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APPENDIX A

SOURCES OF MATERIAL AND INFORMATION

1. American Association of Junior Colleges
1315 Sixteenth Street, N.W.
Washington, D.C. 20036

2. American Hospital Association
840 North Lake Shore Drive
Chicago, Illinois 60611

3. ANA/NLN Committee on Careers
10 Columbus Circle
New York, New York 10019

4. Bell Syndicate Research Office
P. O. Box 725
Cleveland, Ohio 44122

5. Division of Nursing
Public Health Service
U.S. Department of Health, Education and Welfare
Washington, D. C. 20201

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National League for Nursing
10 Columbus Circle
New York, New York 10019

7. National Student Nurses' Association
10 Columbus Circle
New York, New York 10019

8 New Mexico Board of Nursing
505 Marquette Ave., NW
Albuquerque, New Mexico 87101

9 New Mexico State Board of Vocational Education
Capitol Building
Santa Fe. New Mexico 87501

10 Training Resources Branch
Division of Community Health Service, PHS
Department of Health, Education and Welfare
Washington, D. C. 20201

11 Western Council on Higher Education for Nursing
University East Campus
30th Street
Boulder, Colorado 80304

APPENDIX B

The purpose of the University of Albuquerque is the intellectual, moral and physical development of the student according to the principles of Christian education. Since the emphasis is upon the student enjoying a particular quality of education, it is important to define the major aspects of that education. This has best been done by the present reigning Supreme Pontiff and by his illustrious predecessor of happy memory.

1. INTELLECTUAL FREEDOM: The student ". . . has the right to freedom in investigating the truth, and — within the limits of the moral order and the common good — to freedom of speech and publication, and freedom to pursue whatever profession he may choose."

   "Each man should act on his own initiative, conviction, sense of responsibility, and not under the constant pressure of external coercion or enticement. There is nothing human about society that is welded together by force. Far from encouraging, as it should, the attainment of man's progress and perfection, it is merely an obstacle to his freedom."

   —John XXIII, Pacem in Terris

2. SOCIAL RESPONSIBILITY: "Human Society . . . demands that men be guided by justice, respect the rights of others and do their duty. It demands, too, that they be animated by such love as will make them feel the needs of others as their own, and induce them to share their goods with others, and to strive in the world to make all men alike heirs to the noblest effort of intellectual and spiritual values."

   —John XXIII, Pacem in Terris

3. THE PURSUIT OF KNOWLEDGE, WISDOM AND TRUTH: "It is the nature of the human mind to advance in thought and learning. From the apprehensions of empirical truths it rises to a higher,

more scientific understanding of these truths, which in turn, by a logical process of deduction, gives rise to the knowledge of further truths."

—Paul VI to the Council Fathers
September 29, 1963.

And: "Maturity is gauged in a large part by the ability to think and judge rather than by the ability to welcome the comforts and enjoyments of a society which is developed and progressive. In fact, you will understand that it is the maturity of ideas which provokes, produces, directs, appreciates or condemns the maturity of things. Life, whether we want it to be so or not, depends on how we think. Today this is very clear: ideologies—as just now said—are what govern the world."

—Paul VI, April 25, 1964

And again: "Stir the souls of young people and awaken their capacity to make Judgments, to set themselves free, to assert themselves, to be individuals and not just members of a crowd." "Even in the Christian world, where love and charity have supreme and decisive importance, you cannot prescind from the light of truth, which offers love its goals and motives."

—Paul VI, March 21, 1964

4. SOUND MORAL PRINCIPLES: "Leadership is a quality not unknown to them, and solidity and fullness of the teaching they have had equips them for the weighty service they are asked to render. That very same teaching, however, is gauged not to a formal preparation for future work in the many fields of endeavor in which your graduates labor, but also to instilling in them the moral principles which contribute to sound personal virtue and holy family life. And in truth, this is its greatest contribution because the firm moral fibre of

individuals and families in a society naturally leads to a virtuous moral condition of that society as a whole."

—Paul VI, Message to Georgetown University
on the 175th Anniversary of Its Founding
September 26, 1963

5. THE WHOLE MAN: "Always you understand perfection to mean the full, normal, vigorous, cheerful, conscious development of the individual's natural endowments in a symbiosis with supernatural principles—in a delicate, yet magnificent blending of the helps and needs that our religion, once it is properly conceived and wisely practiced, infused into human life. Your educational formula must be complete, it must be harmonious. But the fact remains that your movement is inscribed in the wonderful and sacred field of education."

—Paul VI, March 21, 1964

The University of Albuquerque subscribes to and wholeheartedly serves all of the above propositions.

APPENDIX C

EQUIPMENT ESTIMATE FOR NURSING ARTS LABORATORY

Bedside Unit (to equip six patient units)

6 Hospital beds
6 Bedside stands
6 Overbed trays if not attached to stands
6 Mattresses
9 Pillows
*6 Bedpans
*6 Bath pans
*8 Emesis basins
*6 Water pitchers
*6 Soap dishes
6 Foot stools
6 Chairs - straight
4 Screens
6 Wastepaper baskets
*Plastic would be less expensive

Paper Goods

2 dozen pkg. paper towels
2 boxes paper cups, 6 oz.
2 boxes paper medicine cups
1 box plastic medicine cups
2 pads chart paper of each sheet used
6 rolls toilet paper
3 boxes medicine cards
1 gallon Wescodyne
3 cans Ajax
3 cellulose sponges
1 gallon alcohol
1 bag cotton balls

Linen

36 Bath blankets
48 Pillow cases
48 Top sheets
48 Contour sheets
12 Draw sheets
18 Bedspreads
36 Bath towels
36 Wash cloths

12 Gowns - patient
12 Gowns - isolation
12 Scultetus binders
6 Triangular slings
6 Slings with ties
12 Linen bags
4 Laundry hamper bags

Equipment

6 Pitchers 500 cc
4 Round basins - small
2 Bath thermometers
48 Thermometers, oral
6 Thermometers, rectal
6 Thermometer holders, rectal
2 Carrying baskets, oral thermometers
2 Lifting forceps
2 Lifting forceps holders
2 I.V. stands
2 Hot water bottles

2 Double stethoscopes
2 Sphygmomanometers
4 Asepto syringes, varying sizes
1 Soap dispenser septisol
1 Paper towel dispenser
6 Bars of soap
6 Bottles lotion
1 Laundry hamper frame
4 Clinitest kits
1 Mrs. Chase Doll

APPENDIX D

Recommended Library Accessions
For the Associate Degree Program

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** Essential

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American Journal of Nursing	$ 5.00
Canadian Nurse	5.50
Catholic Nurse	3.00
Child and Family	4.00
Children	1.25
Hospital Progress	4.00
Hospitals	7.00
Journal of American Medical Association	23.00
Junior College Journal	4.00
Nursing Clinics of North America	12.00
Regan Reports on Nursing Law	6.00
Nursing Forum	6.50
Nursing Outlook	5.00
Nursing Research	7.50
Nursing Science	5.00
Nursing Times	9.00
Public Health Reports	5.25
RN	3.50

FREE PERIODICALS OBTAINABLE

1. California's Health	State of California Department of Public Health 2151 Berkley Way Berkeley, California 94704
2. Clinical Symposia	CIBA Pharmaceutical Products Inc., Summit, New Jersey 07901
3. Communicable Disease Summary	New Mexico Department of Public Health Santa Fe, New Mexico 87501
4. Currents in Public Health	Ross Laboratories P.O. Box 1317 Columbus, Ohio 43216
5. Dairy Council Digest	Dairy Council of the Rio Grande Valley 302 San Mateo Blvd., NE Albuquerque, New Mexico 87108
6. Diabetes in the News	Ames Company Division Miles Laboratories Elkhart, Indiana 46514
7. Feelings & Their Medical Significance	Ross Laboratories P.O. Box 1317 Columbus, Ohio 43216
8. Food and Nutrition News	National Live Stock & Meat Board 407 South Dearborn Street Chicago, Illinois 60605
9. Heart Research Newsletter	American Heart Association 44 East 23rd Street New York, New York 10010
10. Geriatric Focus	Knoll Pharmaceutical Company Orange, New Jersey 07051
11. The Journal of Nursing Education	Blakiston Division, McGraw-Hill Book Co. 330 West 42nd Street New York, New York 10036

12. News-Briefs	The Catholic Hospital Association Central Office: 1438 S. Grand Blvd. St. Louis, Missouri 63104
13. Notes & Quotes	Connecticut General Life Ins. Co. Hartford, Connecticut
14. Nutrition News	National Dairy Council Chicago, Illinois 60606
15. Occupational Education Bulletin	American Association of Junior Colleges 1315 Sixteenth St. NW Washington, D. C. 20036
16. Pediatric Currents	Ross Laboratories P.O. Box 1317 Columbus, Ohio 43216
17. Physician's Bulletin	Eli Lilly and Company Principal Offices and Laboratories Indianapolis, Indiana
18. Pictoclinic	Ames Company Elkhart, Indiana 46514
19. Profiles in Nutrition	Ross Laboratories P. O. Box 1317 Columbus, Ohio 43216
20. Review of Nutrition Research	Borden's Review of Nutrition Research, The Borden Company 350 Madison Avenue New York, New York 10017
21. Spectrum	Pfizer Spectrum 235 East 42nd Street New York, New York 10017
22. Therapeutic Notes	Parke, Davis & Company Detroit, Michigan 43232
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APPENDIX E

Contract Between the University of Albuquerque
And
The Regina School of Nursing

THIS AGREEMENT, made and entered into this ______________day of _______, 196_, by and between the University of Albuquerque, Albuquerque, New Mexico, hereinafter referred to as "University", and the Sisters of Charity of Cincinnati, Ohio operating St. Joseph Hospital, Albuquerque, New Mexico, hereinafter referred to as "Hospital" will be effective for a period of one year and renewed annually.

WITNESSETH:

WHEREAS, the University and the Hospital acknowledge public obligation to contribute to education for nursing for the benefit of students and for community needs; and

WHEREAS, it is to the mutual benefit of both parties that students have opportunities for clinical education as students and future practitioners in an environment of quality medical and nursing care; and

WHEREAS, the University has established a program in nursing which requires clinical facilities of said Hospital as the educational laboratory for nursing education; and

WHEREAS, the nursing student of the University will receive instructions and be supervised in the care of patients in the agency or at the residences of patients as part of the University educational program in nursing; and

WHEREAS, the fundamental responsibility of the University nursing faculty and the nursing service staff of the Hospital in making the association successful is that of maintaining harmonious, cooperative relationships, with understanding of each other's primary obligations to education and service respectively, and agree on the common purpose of both, namely, the provision of the best possible nursing care for people; and

WHEREAS, both parties desire to reach an agreement for their separate and mutual responsibility;

THEREFORE, in consideration of the mutual covenants herein expressed, the following agreement is effective by the proper authorizing bodies of both parties, each in independent status from the other:

1. The University will provide qualified faculty sufficient to implement effectively the associate degree nursing program.

2. The faculty of the University Associate Degree Nursing Program is primarily responsible for student learning experiences in both theory and laboratory courses, and accordingly the director and faculy will:

a) plan assignments of clinical practice and other learning opportunities according to the students' need of fulfilling the educational objectives of the program in nursing;

b) plan, develop, implement and assume responsibility for all clinical instruction and evaluation of students in nursing laboratory;

c) plan for correlation of theory with practice in cooperation with the hospital nursing personnel in the assignment of students for nursing care of selective patients;

d) be responsible for its faculty members and students to become familiarized with the personnel policies, standards, procedures, facilities, and code of ethics of the hospital and its nursing department;

e) assume the responsibility to assure that students assigned to the hospital meet hospital standards of health;

f) assume the responsibility in cooperation with the student health service of the University for the health supervision of the students of the associate degree nursing program assigned to the facilities of the Hospital. It is understood, however, that emergency situations involving students shall be treated in the most expedient manner as the situation dictates;

g) six weeks before the beginning of each academic semester furnish the agency Director, Director of Nursing and/or Nursing Supervisors with a schedule of the dates and hours for clinical conferences, indicating the days of the week, hours of clinical practice and the nursing units to which they will be assigned;

h) meet periodically with the designated nursing personnel of the agency for discussions and evaluation of the student program;

i) permit its faculty members to participate as resource persons at meetings, conferences, or other hospital activities on invitation from the appropriate authorities of the hospital and with the approval of the director of the nursing program.

3. The Hospital will:

a) maintain the standards which will make it eligible for approval as a clinical area for instruction in an accredited associate degree program in nursing;

b) permit the faculty and students of the university to use its patient care and patient service facilities for nursing laboratory according to the projected plan submitted by the university and mutually approved annually;

c) permit visitation of clinical facilities by representatives of the New Mexico Board of Nursing for purposes of evaluation for accreditation of the associate degree program in nursing;

d) assume responsibility for the nursing care of patients. Students will not replace hospital staff nor give service to patients apart from its educational value;

e) assist in orientating the university nursing faculty members in whatever is necessary to give them a thorough understanding of the practice field used by the students;

f) plan to meet periodically with designated faculty members of the associate degree nursing program to discuss and evaluate the student program;

g) provide the following facilities, services and supplies for educational use by university faculty and students;

   1) clinical conference rooms located on or near the nursing units to which the students are assigned. These rooms shall be equipped with a table and chairs to accomodate 20, shelf space, and chalk board;
   2) an office for the use of each instructor equipped with a desk, chairs and a file cabinet. This may be combined with the clinical conference room if it is located on the nursing unit;
   3) charts, nursing station references such as Kardex;
   4) a nursing station library which contains at least a medical dictionary, a recent Physicians Desk Reference, a National Formulary, a dietary reference, a pharmacology text, at least one recent reference related to the clinical specialty of the unit, a hospital policy manual, and a hospital procedure manual;
   5) medical records for educational use of students and faculty;
   6) two dressing rooms, one for men and one for women, for the purpose of changing wearing apparel;
   7) same food services as are available to agency staff;
   8) emergency medical care to students and faculty at established hospital charges;
   9) reasonable use of parking areas with assigned space for faculty.

h) refuse educational access to its clinical areas to any university personnel who do not meet the agency standards and policies for health, safety, or ethical behavior;

i) resolve any problem situation in favor of the patient's welfare and restrict the student involved to an observer role until the incident can be clarified by the staff in charge and the nursing faculty;

j) confer with the director of the associate degree nursing program or designated faculty member before determining the assignment of clinical facilities to different nursing education programs.

4. Students shall be responsible for their uniforms except as an agency policy might require a change in which event the agency will supply the necessary changes in accordance with their policy.

5. One month prior to the date of termination of this agreement it will be reviewed by both parties, at which time revisions may be suggested by either party and incorporated as mutually agreed.

6. At any time with the mutual consent of both contracting parties this agreement may be amended during the period of contractual agreement.

7. This agreement may be terminated by either party hereto by six months written notice to the other.

________________________ President, University of Albuquerque	________________________ Administrator St. Joseph Hospital
________________________ Director, Associate Degree Program University of Albuquerque	________________________ Director of Nursing Service St. Joseph Hospital

APPENDIX F

PUBLIC RELATIONS LETTERS

St. Joseph Hospital
Sister of Charity
Albuquerque, New Mexico

7 February 1966

Dear Doctor:

For a number of years our Regina School of Nursing has been cooperating with University of Albuquerque (College of St. Joseph) in studying and developing trends in nursing education. We are happy to announce that we are participating with University of Albuquerque in the establishment of a two year Associate Degree Program in Nursing. Sister Alma, Director of Regina School, has been asked to become director of the new program and many of Regina's faculty members will join the University faculty St. Joseph Hospital will provide clinical facilities for student experience as we have done in the past for Regina students.

St. Joseph Hospital has long pioneered in the health field in New Mexico. Our school of nursing was the first and for many years the only school in the state We feel that we are taking another step forward in participating in this new pattern of nursing education, and we will continue to be actively involved in the education of nurses.

The enclosed directive from Sister Alma enumerates factors which led to the decision to phase out our nursing program. A press release will be issued in a few days regarding this matter but we wanted you informed of our decision in advance.

We thank you for your past loyalty and interest and we are looking forward to your continued support.

Sincerely,

Sister Celestia
Administrator

SC:mmc

Regina School of Nursing
St.Joseph Hospital
Albuquerque, New Mexico 87102

FROM: Sister Alma, Director

TO: St. Joseph Hospital Medical Staff

DATE: February 7, 1966

The University of Albuquerque (College of St. Joseph) has received approval from the North Central Association to offer an Associate Degree program in nursing. Students will be admitted to this new program, the first of its kind in New Mexico, in September 1967. The curriculum will consist of both general education courses and nursing courses and will require two years to complete. Graduates will be eligible to write the licensure examination and become registered nurses.

After considerable investigation and much planning, it seemed in the best interest of nursing education to phase out the existing program offered by Regina School of Nursing and join our resources with those of the University of Albuquerque. The present Regina program will continue to operate until the fall of 1968 when all the students now enrolled in the school will have been graduated.

We feel that we can look with pride to the past at the contributions our graduates have made to the health services and to nursing. However, economic, social and professional forces are causing hospital schools to be progressively less able to meet the needs for nursing education.

Therefore, we are confident that this new pattern of nursing education, offered by the University of Albuquerque, will graduate qualified nurses in greater quantity to help meet the demands of the ever increasing health needs of our growing state.

APPENDIX G
CURRICULUM CONTENT

In planning the nursing course content we might ask ourselves:

1. How will the student learn the historical background, trends, and moral precepts of nursing so she can understand the past, adjust to the present, anticipate the future, and guide her own behavior appropriately?
2. How will she learn the nature of drugs, their administration and form and action — and their relationship to disease and therapy?
3. How will students learn the part food and fluids can play in health and disease and their role in therapy?
4. How will the student learn the effects of injury and disease on the body and the modification of structure and function which result? How can she learn to observe these effects to report intelligently and forestall any unnecessary further development?
5. How can the student learn to care for patients with conditions requiring medical therapy; surgical intervention; psychiatric care?
6. How can she learn to care for the mother and infant and the older child?
7. Where in the curriculum will we place medical asepsis and communicable disease? Surgical asepsis?
8. Where will we obtain the various degrees and stages of illness— the acutely ill, moderately ill, mildly ill? Convalescent, long-term and chronic illness? Sudden illness and emergencies? Rehabilitation?
9. Where will we obtain the spectrum of age and human development ranges from infancy through to senescence?
10. How will we help her to consider the psychological, sociological and spiritual aspects of the patient's needs as well as the physical factors?
11. How will the student learn to give the supportive care needed by patients who will not recover?

12. How will the student learn manual skills, sources of information, the technics of observation and reporting, the management of equipment, how to assist a physician?

13. How will the student learn work organization, self reliance, self control, develop speed, efficiency and judgment?

14. How will the student learn to relate effectively with others—patients, co-workers, superiors, assistants, auxiliary personnel, the public, families and friends of patients?

15. How will the student develop the attitudes which will help her toward a happy, reliable, dedicated, enthusiastic performance in nursing?

16. How can the student develop a continuing desire to learn?

Colorado Conference, Associate Degree Programs in Nursing, 1963.

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